

Board of Directors Meeting Agenda

Thursday, June 13, 2019

10:00 a.m. – 11:00 a.m.

(916) 233-1968

Code: 3043



Meeting Locations:

Courtyard Sacramento Cal Expo
1782 Tribute Road
Sacramento, CA 95815

Los Angeles County Mental Health
550 S. Vermont Avenue, 12th Floor
Los Angeles, CA 90020

By joining this meeting, you are giving consent to be recorded.

California Mental Health Service Authority
(CalMHSA)

Board of Directors Meeting

Agenda

Thursday, June 13, 2019

10:00 a.m. – 11:00 a.m.

In compliance with the Americans with Disabilities Act, if you are a disabled person and you need a disability-related modification or accommodation to participate in this meeting, please contact Laura Li at (916) 859-4818 (telephone) or (916) 859-4805 (facsimile). Requests must be made as early as possible, and at least one full business day before the start of the meeting.

Materials relating to an item on this agenda submitted to this Board after distribution of the agenda packet are available for public inspection at 3043 Gold Canal Drive, Suite 200, Rancho Cordova, CA, 95670, during normal business hours.

A. BOARD OF DIRECTORS REGULAR MEETING

1. CALL TO ORDER

2. ROLL CALL AND INTRODUCTIONS

3. INSTRUCTIONS FOR PUBLIC COMMENT AND STAKEHOLDER INPUT

The Board welcomes and encourages public participation in its meetings. This time is reserved for members of the public (including stakeholders) to address the Board concerning matters on the agenda. Items not on the agenda are reserved for the end of the meeting. Comments will be limited to three minutes per person and 20 minutes total.

For agenda items, public comment will be invited at the time those items are addressed. Each interested party is to complete the Public Comment Card and provide it to CalMHSA staff prior to start of item. When it appears that there are several members of the public wishing to address the Board on a specific item, at the outset of the item, the Board President may announce the maximum amount of time that will be allowed for presentation of testimony on that item. Comment cards will be retained as a matter of public record.

4. CONSENT CALENDAR.....05

A. Routine Matters

1. Minutes from the February 13, 2019 Special CalMHSA Board of Directors Meeting * 06

2. Minutes from the May 9, 2019 CalMHSA Board of Directors Meeting * 12

B. Reports / Correspondence	
1. Treasurer’s Report as of March 31, 2019 *	17
<i>Recommendation: Approval of the Consent Calendar</i>	
5. ADMINISTRATIVE MATTERS	
A. Officers / Executive Committee / Finance Committee Election *	29
<i>Recommendation: Approve recommended slate of Officers, Executive Committee Members and Finance Committee Members</i>	
6. FINANCIAL MATTERS	
A. CalMHSA Annual Proposed Revenue and Expenditure Report – June 30, 2020 *	34
<i>Recommendation: Approval of the CalMHSA Annual Proposed Revenue and Expenditure Report – June 30, 2020</i>	
7. PROGRAM MATTERS	
A. PEI Contracts *	41
<i>Recommendation: Approve contract funding for continued implementation of the Phase V Statewide PEI Projects in FY 19/20 with the existing contractors in the amounts stated in the staff report, delegate authority to the newly re-constituted Sustainability Taskforce to direct staff on allocation of up to \$2 million in additional funds for similar services if funds become available, and authorize the Executive Director or Chief Operating Officer to negotiate and execute contract extensions or amendments to implement the approved funding</i>	
B. California Partnership for Behavioral Health and Wellbeing (CPBHW)	55
<i>Recommendation: None, information only</i>	
8. GOVERNANCE	
A. Periodic Review of Governing Documents *	64
<i>Recommendation: Direction to counsel and staff to review documents and review current practices and report back to Board with any suggested changes</i>	
9. GENERAL DISCUSSION	
A. Report from CalMHSA President – Dawan Utecht	65
• INN Tech Suite Status Report to the Subcommittee of the MHSOAC	
• RFP Update	
• MHSOAC Student Mental Health Project	
<i>Recommendation: None, information only</i>	
B. Report from CalMHSA Executive Director – Wayne Clark	73
• General	
<i>Recommendation: Discussion and/or action as deemed appropriate</i>	

* Indicates an Action Item

C. State Hospital Bed Update.....74

Recommendation: None, information only

10. PUBLIC COMMENTS

A. Public Comments Non-Agenda Items

This time is reserved for members of the public to address the Board relative to matters of CalMHSA not on the agenda. No action may be taken on non-agenda items unless authorized by law. Comments will be limited to three minutes per person and 20 minutes in total. The Board may also limit public comment time regarding agenda items, if necessary, in the case of a lengthy agenda.

11. NEW BUSINESS

General discussion regarding any new business topics for future meetings.

12. CLOSING COMMENTS

This time is reserved for comments by Board members and staff to identify matters for future Board business.

13. ADJOURNMENT

CONSENT CALENDAR
Agenda Item 4

SUBJECT: CONSENT CALENDAR

ACTION FOR CONSIDERATION:

Approval of the Consent Calendar

BACKGROUND AND STATUS:

The Consent Calendar consists of items that require approval or acceptance but are self-explanatory and require no discussion. If the Board would like to discuss any item listed, it may be pulled from the Consent Calendar.

A. Routine Matters

1. Minutes from the February 13, 2019 Special CalMHSA Board of Directors Meeting *
2. Minutes from the May 9, 2019 CalMHSA Board of Directors Meeting *

B. Reports/Correspondence

1. Treasurer's Report as of March 31, 2019 *

RECOMMENDATION:

Approval of the Consent Calendar

TYPE OF VOTE REQUIRED:

Majority vote

REFERENCE MATERIAL(S) ATTACHED:

- Minutes from the February 13, 2019 Special CalMHSA Board of Directors Meeting
- Minutes from the May 9, 2019 CalMHSA Board of Directors Meeting
- Treasurer's Report as of March 31, 2019



"A George Hills Company Administered JPA"

CalMHSA Special Board of Directors Meeting Minutes from February 13, 2019

BOARD MEMBERS PRESENT

Butte County – **Dorian Kittrell**
Colusa County – **Terence M. Rooney, PhD**
Contra Costa County – **Warren Hayes**
El Dorado County – **Patricia Charles-Heathers**
Fresno County – **Dawan Utecht**
Humboldt County – **Emi Boltzer-Rodgers**
Imperial County – **Andrea Kuhlen**
Kern County – **Robin Taylor**
Kings County – **Katie Arnst** (*Alternate*)
Lassen County – **Barbara Longo**
Los Angeles County – **Mimi McKay**
Madera County – **Dennis P. Koch, MPA**
Modoc County – **Stacy Sphar, RN BSN PHN**
Mono County – **Robin Roberts**
Napa County – **James Diel, LMFT**
Nevada County – **Phebe Bell**
Orange County – **Brett O'Brien** (*Alternate*)
Riverside County – **Ryan Quist**
San Bernardino County – **Veronica Kelley, LCSW**
San Diego County – **Alfredo Aguirre**
San Francisco – **Kavoos Ghane Bassari**
San Luis Obispo County – **Anne Robin, LMFT**
Shasta County – **Donnell Ewert, MPH**
Siskiyou County – **Sarah Collard**
Solano County – **Sandra Sinz, LCSW**
Stanislaus County – **Rick DeGette**
Tri-City – **Antonette 'Toni' Navarro**
Ventura County – **Sevet Johnson, PsyD**

BOARD MEMBERS ABSENT

Alameda County
Alpine County
Berkeley, City of
Del Norte County
Glenn County
Inyo County
Lake County
Marin County
Mariposa County
Mendocino County

Merced County
Monterey County
Placer County
Plumas County
Sacramento County
San Benito County
San Joaquin County
San Mateo County
Santa Barbara County
Santa Clara County
Santa Cruz County
Sonoma County
Sutter/Yuba County
Tehama County
Trinity County
Tulare County
Tuolumne County
Yolo County

MEMBERS OF THE PUBLIC

None

STAFF PRESENT

Wayne Clark, CalMHSA Executive Director
Ann Collentine, CalMHSA Deputy Director for Programs
Laura Li, CalMHSA JPA Administrative Director
Jeremy Wilson, CalMHSA Program Coordinator
Armando Bastida, CalMHSA Business Systems Analyst
Doug Alliston, CalMHSA Board Counsel

A. BOARD OF DIRECTORS REGULAR MEETING

1. CALL TO ORDER

CalMHSA Treasurer Bill Walker, Kern County, called the regular session of the Board of Directors Meeting of the California Mental Health Services Authority (CalMHSA) to order at 3:18 P.M. on February 13, 2019, at the Courtyard Cal Expo Sacramento, California. Treasurer Walker welcomed those in attendance as well as those listening in on the phone. He then asked CalMHSA JPA Administrative Director Laura Li to call roll, in order to confirm a quorum of the Board.

2. ROLL CALL AND INTRODUCTIONS

CalMHSA JPA Administrative Director Laura Li called roll and informed President Dawan Utecht a quorum had been reached.

3. INSTRUCTIONS FOR PUBLIC COMMENT AND STAKEHOLDER INPUT

President Utecht reviewed the instructions for public comment and noted items not on the agenda would be reserved for public comment at the end of the agenda. Public

comment cards were to be submitted to Laura Li and individuals on the phone were instructed to email Laura Li with their comments.

4. CONSENT CALENDAR

President Utecht acknowledged the consent calendar and asked for comment from Board members. President Utecht entertained a motion for approval of the Consent Calendar.

Action: Approval of the consent calendar.

Motion: Anne Robin, San Luis Obispo County

Second: Toni Navarro, Tri-City Mental Health Center

Motion passed unanimously with no abstention or opposition.

Public comment was heard from the following individual(s):

None

5. PROGRAM-SPECIFIC CONSENT CALENDAR

A. Los Angeles Media (Participating County: Los Angeles)

1. Sparks LA Sports LLC

Action: Program participant approval of Sparks LA Sports LLC contract for “Spark the True You: Reclaim Your Light” media campaign.

Motion: Mimi McKay, Los Angeles County

Second: Mimi McKay, Los Angeles County

Motion passed unanimously with no abstention or opposition.

Public comment was heard from the following individual(s):

None

2. Los Angeles Media

Action: Program participant approval of Volunteers of America contract for “Dimensions of Moral Injury Conference” media campaign.

Motion: Mimi McKay, Los Angeles County

Second: Mimi McKay, Los Angeles County

Motion passed unanimously with no abstention or opposition.

B. Innovation Tech Program (Participating Counties: Los Angeles, Kern, Orange, Modoc, Mono)

1. The Painted Brain

Action: Program participants approval of Painted Brain contract.

Motion: Bill Walker, Kern County
Second: Mimi McKay, Los Angeles County

Motion passed unanimously with no abstention or opposition.

Public comment was heard from the following individual(s):
None

6. FINANCIAL MATTERS

A. CalMHSA Annual Revenue and Expenditure Report – Proposed Revised Budget June 30, 2019.

Bill Walker, CalMHSA Treasurer, did a thorough review with the Board of the Annual Revenue and Expenditure Report, proposed budget to include target budget for 06/30/2019.

Action: Approve the CalMHSA Revenue and Expenditure Report – Proposed Revised Budget June 30, 2019

B. CalMHSA Agreement for Administrative and Financial Services with George Hills

Bill Walker, CalMHSA Treasurer, presented for the Board's approval, a one-year extension of the George Hills contract. After discussion, a motion was made to approve a one-year extension and with the development of an RFP as part of the Board's fiduciary responsibility.

Action: Recommend for Board approval of a one-year extension of the George Hills contract to June 30, 2020.

Motion: Anne Robin, San Luis Obispo County
Second: Dorian Kittrell, Butte County

Motion passed unanimously with no abstention or opposition.

Public comment was heard from the following individual(s):
None

Action: Development of RFP immediately to make timely decision

Motion: Anne Robin, San Luis Obispo County
Second: Dorian Kittrell, Butte County

Motion passed unanimously with no abstention or opposition.

Public comment was heard from the following individual(s):
None

7. PROGRAM MATTERS.

A. State Hospital Program Update

Laura Li provided a brief update on the State Hospital Program.

Action: *None, Information Only*

Public comment was heard from the following individual(s):
None

B. Innovation Tech Suite Presentation

Bill Walker, CalMHSA Treasurer, provided a thorough review of the Innovation Tech Project, including historical activity and current status, and working being done.

Mr. Walker stated he is proud of the leadership CalMHSA has taken in the past six months.

Action: *None, Information Only.*

Public comment was heard from the following individual(s):
None

C. Inter-Member Transfer Demo

Laura Li, CalMHSA Administrative Director, provided a brief demonstration of the secure portal for Inter-Member Transfers.

Action: *None, Information Only*

8. GENERAL DISCUSSION

A. Report from CalMHSA President – Dawan Utecht

President Utecht provided an update and historical background of the Private Public Partnership. She also discussed topics covered at the January meeting with the Leadership Council.

Dr. Wayne Clark discussed the next conversations he will be having with the Leadership Council and funding commitments, to include confirmation of interest to serve on the Board

Recommendation: *Discussion and/or action as deemed appropriate*

Public comment was heard from the following individual(s):
None

B. Report from CalMHSA Executive Director – Wayne Clark

Dr. Wayne Clark updated the AB 1299 program (Presumptive Transfer) with an emphasis on an April start and a need for counties to participate and issue funds.

County representatives voiced concerns about counties not participating and the amount of youths some counties are receiving from others.

Recommendation: *Discussion and/or action as deemed appropriate*

Public comment was heard from the following individual(s):
None

9. PUBLIC COMMENTS

President Utecht invited members of the public to make comments on non-agenda items.

Public comment was heard from the following individual(s):

None

10. NEW BUSINESS

General discussion regarding any new business topics for future meetings.

11. CLOSING COMMENTS

None

12. ADJOURNMENT

Hearing no further comments, the meeting was adjourned at 4:13 p.m.

Respectfully submitted,

Dawan Utecht
President, CalMHSA

Date

DRAFT



"A George Hills Company Administered JPA"

CalMHSA Board of Directors Meeting Minutes from May 9, 2019

BOARD MEMBERS PRESENT

Butte County – **Dorian Kittrell**
Colusa County – **Terence M. Rooney, PhD**
Contra Costa County – **Warren Hayes**
El Dorado County – **Katy Eckert**
Fresno County – **Dawan Utecht**
Humboldt County – **Emi Boltzer-Rodgers**
Kern County – **Bill Walker**
Los Angeles County – **John Connolly**
Madera County – **Dennis P. Koch, MPA**
Marin County –
Mariposa County – **Christine Doss**
Monterey County – **Amie Miller**
Nevada County – **Phebe Bell**
Orange County – **Brett O'Brien (On phone)**
Placer County – **Amy Ellis**
Sacramento County – **Ryan Quist**
San Joaquin County – **Tony Vartan**
Santa Clara – **Toni Tullys**
Shasta County – **Donnell Ewert, MPH**
Siskiyou County – **Sarah Collard**
Sonoma County – **Bill Carter**
Stanislaus County – **Rick DeGette**
Ventura County – **Sevet Johnson, PsyD**

BOARD MEMBERS ABSENT

Alameda County
Alpine County
Berkeley, City of
Del Norte County
Glenn County
Imperial County
Inyo County
Kings County
Lake County
Lassen County
Marin County
Mendocino County
Merced County
Modoc County
Napa County
Plumas County

Riverside County
San Benito County
San Bernardino County
San Diego County
San Francisco City and County
San Luis Obispo County
San Mateo County
Santa Barbara County
Santa Cruz County
Solano County
Sutter/Yuba County
Tehama County
Tri-City Mental Health Center
Trinity County
Tulare County
Tuolumne County
Yolo County

MEMBERS OF THE PUBLIC

None

STAFF PRESENT

Laura Li, CalMHSA JPA Administrative Director
Wayne Clark, CalMHSA Executive Director
Armando Bastida, CalMHSA Business Systems Analyst
Doug Alliston, CalMHSA Board Counsel

A. BOARD OF DIRECTORS REGULAR MEETING

1. CALL TO ORDER

CalMHSA Treasurer Bill Walker, Kern County, called the regular session of the Board of Directors Meeting of the California Mental Health Services Authority (CalMHSA) to order at 10:01 A.M. on May 9, 2019, at the Courtyard Cal Expo Sacramento, California. Treasurer Walker welcomed those in attendance as well as those listening in on the phone. He then asked CalMHSA JPA Administrative Director Laura Li to call roll, in order to confirm a quorum of the Board.

2. ROLL CALL AND INTRODUCTIONS

CalMHSA JPA Administrative Director Laura Li called roll and informed President Dawan Utecht a quorum had not been reached.

3. INSTRUCTIONS FOR PUBLIC COMMENT AND STAKEHOLDER INPUT

President Utecht reviewed the instructions for public comment and noted items not on the agenda would be reserved for public comment at the end of the agenda. Public comment cards were to be submitted to Laura Li and individuals on the phone were instructed to email Laura Li with their comments.

4. CONSENT CALENDAR

President Utecht acknowledged the consent calendar and asked for comment from Board members. There was no quorum of the board, so no action was taken to approve the Consent Calendar.

Action: Approval of the consent calendar.

Motion: N/A

Second: N/A

Laura Li provided a brief update on the State Hospital Beds program. She reported that a possible site for Alternative to State Hospital in Kern County has been proposed and holds a lot of promise. A site visit will be scheduled for the first week of June.

Action: None, information only.

Public comment was heard from the following individual(s):

None

5. PROGRAM-SPECIFIC CONSENT CALENDAR

A. Northern Regional Suicide Prevention Hotline (Participating Counties: Butte, El Dorado, Humboldt, Nevada, Sacramento, Shasta, Solano and Yuba)

Laura Li provided a brief overview of the expansion of the Central Valley Suicide Prevention Hotline (CVSPH) to the Northern Regional Suicide Prevention Hotline (NRSPH). Ms. Li explained that the intent is to use the same vendor for both programs, under the current contractual terms with CVSPH.

Action: None, information only

6. ADMINISTRATIVE MATTERS

A. Executive Committee / Finance Committee Election.

Ms. Li stated that this meeting is the 30-day notice to members of a proposed election slate. Members interested in serving on the Executive Committee and/or Finance Committee should contact Dawan Utecht. Ms. Li stated that the Executive Committee and Finance Committee elections will be done at the June meeting.

Action: Approve recommended slate of officers, Executive Committee members representing the five CMDHA regions, and Finance Committee Members.

Motion: N/A

Second: N/A

There was no quorum of the Board, so no action was taken.

7. PROGRAM MATTERS.

A. Public Private Partnership

Dr. Wayne Clark provided an overview of the history of the formation of CPBHW. He reported that the CPBHW Leadership Council is comprised of 19 individuals from foundations such as Lockton, IBM, Dignity Health and others. He also announced that Dr. Oz has agreed to be on the CPBHW Board.

Action: *CalMHSA Board a) supports the continued establishment of the California Partnership for Behavioral Health and Wellbeing (CPBHW) as an independent 501(c)(3) private sector funded project to leverage with CalMHSA initiatives and other projects that improve the emotional wellbeing for the people of California and; b) requests staff to further define the operational relationship between CPBHW and CalMHSA.*

Motion: N/A

Second: N/A

There was no quorum of the Board, so no action was taken.

Public comment was heard from the following individual(s):

None

8. GENERAL DISCUSSION

A. Report from CalMHSA President – Dawan Utecht

President Utecht thanked members for attending.

Recommendation: *Discussion and/or action as deemed appropriate*

Public comment was heard from the following individual(s):

None

B. Report from CalMHSA Executive Director – Wayne Clark

Dr. Wayne Clark reported that the OAC has an incubator project. The OAC will bring a proposal to CalMHSA to be the fiscal manager for one of their incubator projects that comes from the legislation that they had this year. A proposal will be brought to the Board at the June meeting.

Dr. Clark reported that DSS distributed information on the 1299 process and data that is available. CalMHSA will review the information to see how it will work with the current banking pool managed by CalMHSA. Dr. Clark believes the proposed process will be much more efficient.

President Utecht stated that Ms. Li sent a memo explaining the 1299 process. Any questions should be directed to Ms. Li.

Recommendation: *Discussion and/or action as deemed appropriate*

Public comment was heard from the following individual(s):

None

9. PUBLIC COMMENTS

President Utecht invited members of the public to make comments on non-agenda items.

Public comment was heard from the following individual(s):

None

10. NEW BUSINESS

General discussion regarding any new business topics for future meetings.

11. CLOSING COMMENTS

None

12. ADJOURNMENT

Hearing no further comments, the meeting was adjourned at 10:33 a.m.

Respectfully submitted,

Dawan Utecht
President, CalMHSA

Date

DRAFT



"A George Hills Company Administered IPA"

Treasurer's Report

As of March 31, 2019

	Book Balance	Market Value	Effective Yield
Cash with California Bank & Trust	\$249,202	\$249,202	0.00%
Local Agency Investment Fund	\$4,397,172	\$4,397,172	2.39%
Morgan Stanley – Money Trust	\$12,284,472	\$12,284,472	0.00%
Morgan Stanley - Investments	\$12,955,626	\$12,955,707	2.48%
Total Cash and Investments	\$29,886,372	\$29,886,448	2.09%

The Local Agency Investment Fund (LAIF) market value was derived by applying the March 2019 fair value factor of 1.000146954 to the book value.

Attached are Morgan Stanley and LAIF reports detailing all investment transactions.

I certify that this report reflects all cash and investments and is in conformance with the Authority's Investment Policy. The investment program herein shown provides sufficient cash flow liquidity to meet the Authority's expenditures for the next six (6) months.

Respectfully submitted,

Accepted,



Kim Santin, Finance Director

William Walker, Treasurer

System: 4/1/2019 2:05:25 PM
User Date: 4/1/2019

California Mental Health Servi
RECONCILIATION POSTING JOURNAL
Bank Reconciliation

Page: 1
User ID: kgonzalez

Audit Trail Code: CMADJ00000211
Checkbook ID: CB&T CHECKING
Description: CA Bank & Trust Checking

Bank Statement Ending Balance: \$1,234,627.89
Bank Statement Ending Date: 3/29/2019
Cutoff Date: 3/29/2019

Statement Ending Balance	\$1,234,627.89
Outstanding Checks (-)	\$985,526.00
Deposits in Transit (+)	\$0.00
Adjusted Bank Balance	----- \$249,101.89
Checkbook Balance as of Cutoff	\$249,281.28
Adjustments	(\$179.39)
Adjusted Book Balance	----- \$249,101.89
Difference	----- \$0.00



P.O. Box 489, Lawndale, CA 90260-0489

Statement of Accounts

Page 1 of 9
 This Statement: March 29, 2019
 Last Statement: February 28, 2019

Account [REDACTED]

DIRECT INQUIRIES TO:
 Customer Service 1 (800) 400-6080

0051703 4089-06-0000-CBT-PG0030-00048

CA MENTAL HEALTH SERVICES AUTHORITY
 3043 GOLD CANAL DR FL 2
 RANCHO CORDOVA CA 95670-6393

Sacramento Main
 520 Capitol Mall Suite 100
 Sacramento, CA 95814-4714
 (916) 341-4800

SUMMARY OF ACCOUNT BALANCE

Account Type	Account Number	Checking/Savings Ending Balance	Outstanding Balances Owed
PF Business Analyzed Account	[REDACTED]	\$1,234,627.89	

PF BUSINESS ANALYZED ACCOUNT 1030206381

Previous Balance	Deposits/Credits	Charges/Debits	Checks Processed	Ending Balance
182,226.73	2,319,875.68	4,520.91	1,262,953.59	1,234,627.89

7 DEPOSITS/CREDITS

Date	Amount	Description
03/01	9,470.86	REMOTE DEPOSIT 5353010708
03/04	900,000.00	WIRE/IN-2019030400005615;ORG STATE OF CALIFORNIA - LAIF;REF 1305001572
03/12	29,836.80	REMOTE DEPOSIT 5353012924
03/15	506,126.00	COUNTY OF KERN ACCTS PA REF # 019073005960367 1107825519
03/21	120,000.00	WIRE/IN-2019032100005963;ORG STATE OF CALIFORNIA - LAIF;REF 1304501379
03/26	104,442.00	REMOTE DEPOSIT 5353014077
03/29	650,000.00	WIRE/IN-2019032900009515;ORG STATE OF CALIFORNIA - LAIF;REF 1305002602

3 CHARGES/DEBITS

Date	Amount	Description
03/18	100.00	DEBIT MEMO 5353128776
03/18	4,241.52	AMEX EPAYMENT ACH PMT REF # 019077006990022 1108548660
03/21	179.39	ANALYSIS SERVICE FEE

44 CHECKS PROCESSED

Number	Date	Amount	Number	Date	Amount	Number	Date	Amount
104102	03/12	27,272.84	104133	03/07	164.92	104144	03/13	13,340.48
104121*	03/07	35,895.21	104134	03/14	22,334.75	104145	03/15	40,590.03
104122	03/14	594.00	104135	03/08	9,352.50	104146	03/13	7,528.67
104125*	03/08	9,445.64	104136	03/15	14,625.00	104147	03/13	31,702.00
104126	03/08	6,489.00	104137	03/14	300,000.00	104148	03/13	195.92
104127	03/05	42,016.00	104138	03/19	1,250.00	104149	03/13	71,528.07
104128	03/05	11,546.66	104139	03/19	1,250.00	104151*	03/27	1,000.00
104129	03/05	188,197.00	104140	03/11	1,250.00	104152	03/25	26.95
104130	03/05	23,939.57	104141	03/08	217.18	104153	03/28	18,750.00
104131	03/05	27,116.07	104142	03/08	16,500.00	104157*	03/27	112,700.00
104132	03/08	49,116.57	104143	03/19	46,185.78	104161*	03/27	2,781.00



P.O. Box 489, Lawndale, CA 90260-0489

Continued ...

Number	Date	Amount	Number	Date	Amount	Number	Date	Amount
104162	03/27	21,354.00	104166	03/28	315.00	104172	03/28	850.00
104163	03/27	60,614.48	104169*	03/29	15,000.00	104173	03/28	5,100.00
104164	03/28	4,074.31	104170	03/26	1,499.13	104174	03/28	17,720.24
104165	03/28	515.00	104171	03/26	1,009.62			

* Not in check sequence

AGGREGATE OVERDRAFT AND RETURNED ITEM FEES

	Total for This Period	Total Year-to-Date
Total Overdraft Fees	\$0.00	\$0.00
Total Returned Item Fees	\$0.00	\$0.00

To learn more about our other products and services that may lower the cost of managing account overdrafts or to discuss removing overdraft coverage from your account, please contact Customer Service or visit your local branch.

DAILY BALANCES

Date	Balance	Date	Balance	Date	Balance
03/01	191,697.59	03/12	673,015.23	03/21	743,495.62
03/04	1,091,697.59	03/13	548,720.09	03/25	743,468.67
03/05	798,882.29	03/14	225,791.34	03/26	845,401.92
03/07	762,822.16	03/15	676,702.31	03/27	646,952.44
03/08	671,701.27	03/18	672,360.79	03/28	599,627.89
03/11	670,451.27	03/19	623,675.01	03/29	1,234,627.89



System: 4/1/2019 2:17:04 PM
User Date: 4/1/2019

California Mental Health Servi
RECONCILIATION POSTING JOURNAL
Bank Reconciliation

Page: 1
User ID: kgonzalez

Audit Trail Code: CMADJ00000212
Checkbook ID: CB&T AB1299
Description: Presumptive Transfer

Bank Statement Ending Balance: \$100.00
Bank Statement Ending Date: 3/29/2019
Cutoff Date: 3/29/2019

Statement Ending Balance	\$100.00
Outstanding Checks (-)	\$0.00
Deposits in Transit (+)	\$0.00
Adjusted Bank Balance	\$100.00
Checkbook Balance as of Cutoff	\$100.00
Adjustments	\$0.00
Adjusted Book Balance	\$100.00
Difference	\$0.00



CALIFORNIA BANK
TRUST

P.O. Box 489, Lawndale, CA 90260-0489

Statement of Accounts

Page 1 of 3

This Statement: March 29, 2019

Last Statement: March 17, 2019

Account 5795359271

DIRECT INQUIRIES TO:

Customer Service 1 (800) 400-6080

0048719

4089-06-0000-CBT-PC0023-00001

CA MENTAL HEALTH SERVICES AUTHORITY
3043 GOLD CANAL DR FL 2
RANCHO CORDOVA CA 95670-6393

Sacramento Main
520 Capitol Mall Suite 100
Sacramento, CA 95814-4714
(916) 341-4800

SUMMARY OF ACCOUNT BALANCE

Account Type	Account Number	Checking/Savings Ending Balance	Outstanding Balances Owed
PF Business Analyzed Account	[REDACTED]	\$100.00	

PF BUSINESS ANALYZED ACCOUNT 5795359271

Previous Balance	Deposits/Credits	Charges/Debits	Checks Processed	Ending Balance
0.00	100.00	0.00	0.00	100.00

1 DEPOSIT/CREDIT

Date	Amount	Description
03/18	100.00	DEPOSIT 5353128775

0 CHARGES/DEBITS

There were no transactions this period.

0 CHECKS PROCESSED

There were no transactions this period.

AGGREGATE OVERDRAFT AND RETURNED ITEM FEES

	Total for This Period	Total Year-to-Date
Total Overdraft Fees	\$0.00	\$0.00
Total Returned Item Fees	\$0.00	\$0.00

To learn more about our other products and services that may lower the cost of managing account overdrafts or to discuss removing overdraft coverage from your account, please contact Customer Service or visit your local branch.

DAILY BALANCES

Date	Balance
03/18	100.00



Local Agency Investment Fund
P.O. Box 942809
Sacramento, CA 94209-0001
(916) 653-3001

www.treasurer.ca.gov/pmia-laif/laif.asp

May 02, 2019

CALIFORNIA MENTAL HEALTH SERVICES
 AUTHORITY
 STAFF
 3043 GOLD CANAL DRIVE, SUITE 200
 RANCHO CORDOVA, CA 95670

PMIA Average Monthly Yields

Account Number:



Tran Type Definitions

January 2019 Statement

Effective Date	Transaction Date	Tran Type	Tran Confirm Number	Authorized Caller	Amount
1/15/2019	1/15/2019	RW	1596314	KIM SANTIN	-300,000.00
1/15/2019	1/14/2019	QRD	1595481	SYSTEM	46,146.14

Account Summary

Total Deposit:	46,146.14	Beginning Balance:	6,971,026.07
Total Withdrawal:	-300,000.00	Ending Balance:	6,717,172.21

Local Agency Investment Fund
P.O. Box 942809
Sacramento, CA 94209-0001
(916) 653-3001

www.treasurer.ca.gov/pmia-laif/laif.asp
 May 02, 2019

CALIFORNIA MENTAL HEALTH SERVICES
 AUTHORITY
 STAFF
 3043 GOLD CANAL DRIVE, SUITE 200
 RANCHO CORDOVA, CA 95670

PMIA Average Monthly Yields

Account Number:



Tran Type Definitions

February 2019 Statement

Effective Date	Transaction Date	Tran Type	Confirm Number	Authorized Caller	Amount
2/1/2019	1/31/2019	RW	1597555	KIM SANTIN	-400,000.00
2/19/2019	2/15/2019	RW	1598535	KIM SANTIN	-250,000.00

Account Summary

Total Deposit:	0.00	Beginning Balance:	6,717,172.21
Total Withdrawal:	-650,000.00	Ending Balance:	6,067,172.21

Local Agency Investment Fund
P.O. Box 942809
Sacramento, CA 94209-0001
(916) 653-3001

www.treasurer.ca.gov/pmia-laif/laif.asp
April 22, 2019

CALIFORNIA MENTAL HEALTH SERVICES
AUTHORITY
STAFF
3043 GOLD CANAL DRIVE, SUITE 200
RANCHO CORDOVA, CA 95670

PMIA Average Monthly Yields

Account Number:



Tran Type Definitions

March 2019 Statement

Effective Date	Transaction Date	Tran Type	Tran Number	Confirm Number	Authorized Caller	Amount
3/4/2019	3/1/2019	RW	1599394		KIM SANTIN	-900,000.00
3/21/2019	3/20/2019	RW	1600454		KIM SANTIN	-120,000.00
3/29/2019	3/29/2019	RW	1601176		KIM SANTIN	-650,000.00

Account Summary

Total Deposit:	0.00	Beginning Balance:	6,067,172.21
Total Withdrawal:	-1,670,000.00	Ending Balance:	4,397,172.21



**CALIFORNIA STATE TREASURER
FIONA MA, CPA**



PMIA Performance Report

Date	Daily Yield*	Quarter to Date Yield	Average Maturity (in days)
03/18/19	2.44	2.39	179
03/19/19	2.44	2.39	178
03/20/19	2.44	2.39	177
03/21/19	2.44	2.39	178
03/22/19	2.44	2.39	177
03/23/19	2.44	2.39	177
03/24/19	2.44	2.39	177
03/25/19	2.44	2.39	175
03/26/19	2.44	2.39	174
03/27/19	2.44	2.39	175
03/28/19	2.44	2.39	176
03/29/19	2.44	2.39	181
03/30/19	2.44	2.39	181
03/31/19	2.44	2.39	179
04/01/19	2.44	2.44	179
04/02/19	2.44	2.44	184
04/03/19	2.44	2.44	182
04/04/19	2.44	2.44	179
04/05/19	2.44	2.44	179
04/06/19	2.44	2.44	179
04/07/19	2.44	2.44	179
04/08/19	2.44	2.44	181
04/09/19	2.45	2.43	182
04/10/19	2.45	2.43	181
04/11/19	2.45	2.43	181
04/12/19	2.45	2.43	182
04/13/19	2.45	2.44	182
04/14/19	2.45	2.44	182
04/15/19	2.45	2.44	182
04/16/19	2.45	2.44	182
04/17/19	2.45	2.44	181

*Daily yield does not reflect capital gains or losses

[View Prior Month Daily Rates](#)

LAIF Performance Report

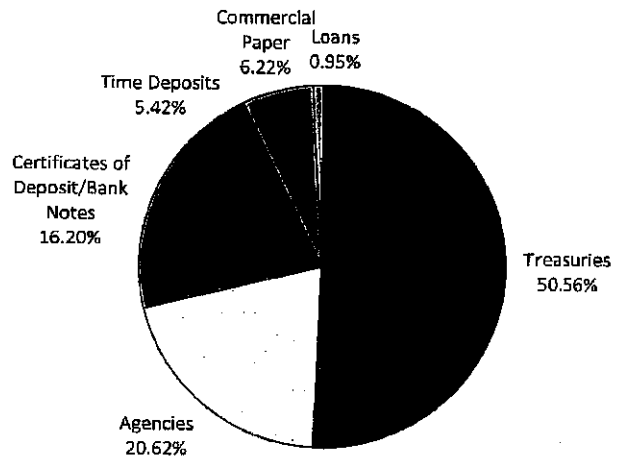
Quarter Ending 03/31/19

Apportionment Rate: 2.55
 Earnings Ratio: 0.00006976322349099
 Fair Value Factor: 1.000146954
 Daily: 2.44%
 Quarter to Date: 2.39%
 Average Life: 179

PMIA Average Monthly Effective Yields

Mar 2019 2.436
 Feb 2019 2.392
 Jan 2019 2.355

**Pooled Money Investment Account
Portfolio Composition
03/31/19
\$86.9 billion**



Percentages may not total 100% due to rounding

Notes: The apportionment rate includes interest earned on the CalPERS Supplemental Pension Payment pursuant to Government Code 20825 (c)(1)

Based on data available as of 04/17/2019



Morgan Stanley

CLIENT STATEMENT | For the Period March 1-31, 2019

Basic Securities Account
CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY
Nickname: Core-Cash ACCT

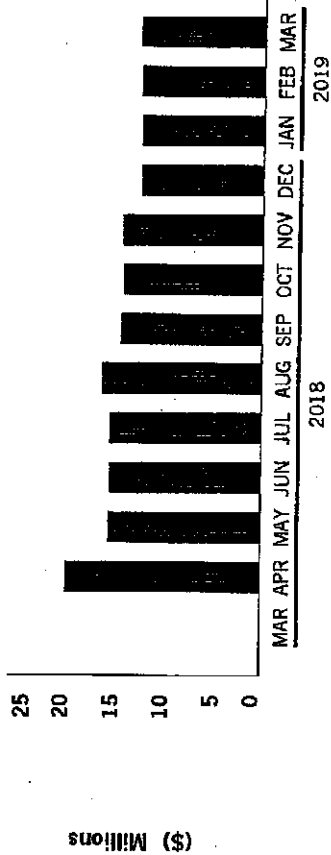
Account Summary

CHANGE IN VALUE OF YOUR ACCOUNTS (includes accrued interest)

	This Period (3/1/19-3/31/19)	This Year (1/1/19-3/31/19)
TOTAL BEGINNING VALUE	\$12,232,472.88	\$12,133,504.01
Credits	2,769,860.92	6,541,943.92
Debits	(2,741,910.38)	(6,461,029.74)
Security Transfers	—	—
Net Credits/Debits/Transfers	\$27,950.54	\$80,914.18
Change in Value	24,048.25	70,053.48
TOTAL ENDING VALUE	\$12,284,471.67	\$12,284,471.67

MARKET VALUE OVER TIME

The below chart displays the most recent thirteen months of Market Value.

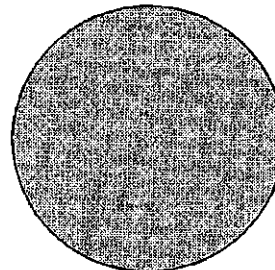


This chart does not reflect corrections to Market Value made subsequent to the dates depicted. It may exclude transactions in Annuities or positions where we are not the custodian, which could delay the reporting of Market Value.

ASSET ALLOCATION (includes accrued interest)

	Market Value	Percentage
Cash	\$12,284,471.67	100.00
TOTAL VALUE	\$12,284,471.67	100.00%

FDIC rules apply and Bank Deposits are eligible for FDIC insurance but are not covered by SIPC. Cash and securities (including MMFs) are eligible for SIPC coverage. See Expanded Disclosures. Values may include assets externally held, which are provided to you as a courtesy, and may not be covered by SIPC. For additional information, refer to the corresponding section of this statement.



Cash

This asset allocation represents holdings on a trade date basis, and projected settled Cash/BDP and MMF balances. These classifications do not constitute a recommendation and may differ from the classification of instruments for regulatory or tax purposes.



Morgan Stanley

CLIENT STATEMENT | For the Period March 1-31, 2019

Page 19 of 22

Portfolio Management Active Assets Account
CALIFORNIA MENTAL HEALTH SVC
3043 GOLD CANAL DR, #200

Account Detail

Percentage of Holdings	Total Cost	Market Value	Unrealized Gain/(Loss)	Est Ann Income	Current Yield %
100.00%	\$12,885,370.35	\$12,949,677.50	\$64,307.15 ST	\$12,938.00	0.10%
		\$12,955,625.99		\$5,948.49	

Unrealized Gain/(Loss) totals only reflect positions that have both cost basis and market value information available. Cash, MMF, Deposits and positions stating 'Please Provide' or 'Pending Corporate Actions' are not included.

ALLOCATION OF ASSETS (*includes accrued interest)

	Cash	Equities	Fixed Income & Preferred Securities	Alternatives	Structured Investments	Other
Cash, BDP, MMFs	\$0.06	—	—	—	—	—
Cash, BDP, MMFs (Debit)	(0.06)	—	—	—	—	—
Corporate Fixed Income ~	—	—	\$3,745,212.35	—	—	—
Government Securities ~	—	—	9,210,413.64	—	—	—
TOTAL ALLOCATION OF ASSETS ~	—	—	\$12,955,625.99	—	—	—

ACTIVITY

INVESTMENT RELATED ACTIVITY

PURCHASES, DIVIDEND REINVESTMENTS, SALES AND REDEMPTIONS

Activity Date	Settlement Date	Activity Type	Description	Comments	Quantity	Price	Credits/(Debits)
3/5	3/7	Bought	APPLE INC	ACTED AS AGENT	504.17	\$99.4170	\$(497,589.17)
3/7	3/7	Redemption	1.100% DUE2019-08-02 [037833CB4]	ACCRUED INTEREST	504.17		
3/7	3/7	Redemption	UNITED STATES TREASURY BILL	DUE2019-03-07 [912796QZ5]	500,000.000	100.0000	500,000.00
3/13	3/14	Bought	WALMART INC C/P	REDEMPTION OF MATURED BOND	750,000.000	99.8051	(748,537.92)
3/13	3/14	Bought	DUE2019-04-12 [93114FRC0]	ACTED AS AGENT			
3/13	3/14	Bought	FED HOME LN BK	YIELD PRICE 2.4200PCT			
3/14	3/14	Redemption	DUE2019-05-31 [313384GG8]	ACTED AS AGENT	500,000.000	99.4778	(497,389.17)
3/14	3/14	Redemption	WAL-MART STORES INC C/P	DUE2019-03-14 [93114FQE7]	750,000.000	100.0000	750,000.00
3/14	3/14	Redemption	UNITED STATES TREASURY BILL	REDEMPTION OF MATURED BOND	500,000.000	100.0000	500,000.00
3/15	3/15	Redemption	UNITED STATES TREASURY NOTE	DUE2019-03-15 [912828P95]	500,000.000	100.0000	500,000.00

ADMINISTRATIVE MATTERS
Agenda Item 5.A

SUBJECT: OFFICERS / EXECUTIVE COMMITTEE / FINANCE COMMITTEE ELECTION

ACTION FOR CONSIDERATION:

Approve recommended slate of Officers, Executive Committee Members, and Finance Committee Members.

BACKGROUND AND STATUS:

CalMHSA Bylaws, Section 5.4 Elections, states the Board will elect, by majority vote, a new slate of officers, executive committee and finance committee members at the last board meeting of the fiscal year. As such, below is the proposed slate for approval and vacancies for appointment.

POSITION	MEMBER NAME AND COUNTY	ACTION NEEDED
Officers		
• Secretary	Vacant	Vacant: Fill Position
• Treasurer	Luke Bergmann, San Diego County	Appointment: Approval
• CBHDA At-Large Member	Toni Navarro, Tri-City Mental Health	Current: Re-elect or other
Regional Representatives		
• Bay Area Member	Sandra Sinz, Solano County	Appointment: Approval
• Bay Area Alternate	Jei Africa, Marin County	Appointment: Approval
• Central Member	Amy Ellis, Placer County	Appointment: Approval
• Central Alternate	Dennis Koch, Madera County	Current: Re-elect or other
• Southern Member	Jeff Nagel, Orange County	Appointment: Approval
• Superior Member	Phebe Bell, Nevada County	Appointment: Approval
Finance Committee		
• Chair	Luke Bergmann, San Diego County	Appointment: Approval
• Bay Area	Vacant	Vacant: Fill Position
• Central	Dennis Koch, Madera County	Current: Re-elect or other
• Superior	Jenine Miller, Mendocino county	Current: Re-elect or other

The proposed slate of Officers and Executive Committee members is as follows:

Officers ¹				
Role	Member	Term Length	Term Start Date	Term End Date
President	Dawan Utecht, Fresno County	2 years	07/01/2018	06/30/2020
Vice President	William Walker, Kern County	2 years	07/01/2018	06/30/2020
Secretary	Vacant	2 years		
Treasurer	Luke Bergmann, San Diego County	annual ²	05/18/2019	06/30/2021
Past President	Terence Rooney, Colusa County	2 years	07/01/2018	06/30/2020
CBHDA At-Large Member ³	Toni Navarro, Tri-City Mental Health	1 year	07/01/2018	06/30/2019

Regional Representatives				
Region	Member and Alternate	Term Length	Term Start Date	Term End Date
Bay Area Member	Sandra Sinz, Solano County	2 years	07/01/2019	06/30/2021
Bay Area Alternate	Jei Africa, Marin County	2 years	07/01/2019	06/30/2021
Central Member	Amy Ellis, Placer County	2 years	07/01/2019	06/30/2021
Central Alternate	Dennis Koch, Madera County	2 years	07/01/2017	06/30/2019
Los Angeles Member	Jonathan Sherin	2 years	Continuous	
Los Angeles Alternate	Mimi Martinez McKay	2 years	07/01/2018	06/30/2020
Southern Member	Jeff Nagel, Orange County	2 years	07/01/2019	06/30/2021
Southern Alternate	Anne Robin, San Luis Obispo County	2 years	07/01/2018	06/30/2020
Superior Member	Phebe Bell, Nevada County	2 years	06/30/2019	06/30/2021
Superior Alternate	Sarah Collard, Siskiyou County	2 years	07/01/2018	06/30/2020

¹ Additional candidate(s) may be nominated at the time of the meeting

² Treasurer – to serve a two-year term but be re-approved each year to represent the JPA on investment decisions

³ CBDHA At-Large-Member per the December 12, 2013 Board approved bylaw changes

FINANCE COMMITTEE BACKGROUND AND STATUS

On June 13, 2019, there is one (1) vacancy and three (3) member terms for the Finance Committee. The CalMHSA Bylaws state that committee members to be appointed by the Board President and approved by the Board of Directors.

The appointment of committee members is as follows:

Position/Region	Nominee	Term
Chair	Luke Bergmann, San Diego County	05/18/2019 – 06/30/2021 ¹
Bay Area	Vacant	
Central	Dennis Koch, Madera County	07/01/2017 – 06/30/2019
Los Angeles	Mimi McKay, Los Angeles County	02/29/2012 – 06/30/2019
Superior	Jenine Miller, Mendocino County	07/01/2017 – 06/30/2019
Southern	Veronica Kelley, San Bernardino County	07/01/2018 – 06/30/2020
Ex Officio	Terence Rooney, Placer County	N/A

RECOMMENDATION:

Approve recommended slate of Officers, Executive Committee Members, and Finance Committee Members.

TYPE OF VOTE REQUIRED:

Majority of the Board of Directors

REFERENCE MATERIAL(S) ATTACHED:

- Officers, Executive and Finance Committee Responsibilities (CalMHSA Bylaws, Board approved June 15, 2017)

CALMHSA BYLAWS

RESPONSIBILITIES

ARTICLE 5 – OFFICERS OF THE BOARD

Section 5.5 - Duties

- 5.5.1 President - The President shall preside at all meetings of the Authority. The President shall appoint the members of all ad hoc committees, which may be formed as necessary or appropriate for carrying on the activities of the Authority. The President shall execute documents, or delegate to the Executive Director on behalf of the Authority as authorized by the Board and shall serve as the primary liaison between this and any other organization. The President shall serve as ex-officio member of all committees.
- 5.5.2 Vice President - The Vice President shall also serve as ex-officio member of all committees, when the President is unable to attend. In the absence of or temporary incapacity of the President, the Vice President shall exercise the functions covered in Section 5.5.1 above.
- 5.5.3 Secretary - The Secretary will be responsible for the oversight of staff's preparation and distribution of all minutes and agendas of the Board, and any other committee meetings, preparing necessary correspondence, and maintaining files and records.
- 5.5.4 Treasurer - The Treasurer shall serve under the authority of and comply with Government Code section 6505.6, and shall be responsible for: 1) ensuring the custody of and disbursement of Authority funds, accounts, and property, in accordance with the California Government Code; 2) supervising the maintenance of such records to assure that financial accounts, records, funds, and property are maintained in accordance with accepted accounting practices and procedures prescribed by the Government Accounting Standards Board; 3) providing for inspection of all financial records; 4) overseeing, monitoring, and reporting on investment action; and, 5) overseeing and monitoring the financial audit.

ARTICLE 6 – COMMITTEES

Section 6.1 – Executive Committee

Members - To facilitate the expeditious handling of transactions relating to the Authority's operations, an Executive Committee is established.

6.1.4 Authority - The Executive Committee shall have the same authority as that of the Board except for those items specifically reserved unto the Board in Section 4.1.3, and as to those items the Executive Committee can act in the absence of a quorum of the Board at a regularly scheduled meeting, subject to the Appeal Process stated in Section 6.1.7. The Executive Committee may also exercise the authority delegated by a vote of the majority of the participants in a Program.

Section 6.3 – Finance Committee

The Finance Committee is established as a standing committee to oversee, review, and provide direction to the Authority’s Board of Directors regarding the Authority’s financial matters and investment programs.

6.3.5 The Finance Committee shall have the following duties:

- 6.3.5.1 Review the Authority’s financial policies and make recommendations for the Board’s approval.
- 6.3.5.2 Review the proposed annual operating budget presented by the Executive Director. After any appropriate revisions, the committee will accept the budget. Then the committee chair will present the budget to the Board of Directors for approval.
- 6.3.5.3 Interview and recommend selection of the external auditor when directed by the Board of Directors.
- 6.3.5.4 Review audited financial statements and accept and file report.
- 6.3.5.5 Recommend guidelines and goals for the investment of the Authority’s funds to the Board of Directors.
- 6.3.5.6 Review the status of the Authority’s investments.
- 6.3.5.7 Because action may need to be taken on short notice, more quickly than the Board of Directors could be convened, the Finance Committee is authorized to review bids of, select, contract with and/or discharge the investment consultant and/or the investment manager, if the President concurs. When it so acts, the Finance Committee shall report such actions to the Board of Directors at its next meeting.
- 6.3.5.8 Other duties as authorized by the Board of Directors.

FINANCIAL MATTERS
Agenda Item 6.A

SUBJECT: CALMHSA ANNUAL PROPOSED REVENUE AND EXPENDITURE REPORT – JUNE 30, 2020

ACTION FOR CONSIDERATION:

Approval of the CalMHSA Proposed Revenue and Expenditure Report – June 30, 2020

BACKGROUND AND STATUS:

The CalMHSA Bylaws provide for a fiscal year of July 1 to June 30 and require the Board of Directors to adopt the annual budget by July 1 of the new fiscal year. The draft budget is to be presented to the Board at least 45 days prior. (Bylaws, §§ 4.1.3, 8.1, and 9.1.). The draft was distributed to the Board on May 15, 2019.

Bill Walker, CalMHSA Vice President, will provide an oral overview of the timeline for compilation of the Annual Revenue and Expenditure Report – Proposed Budget June 30, 2020, distributed as discussed above.

The CalMHSA staff has reviewed the direction from the Board and analyzed the projected programs of CalMHSA as it relates to the projection for fiscal year 2019/20. Revenue projections have been made based upon current estimate of funds to be received and program administrative requirements have been shaped based on size and source of funds expected for each revenue stream.

General Budget Assumptions and Criteria Applied

1. This budget has been compiled based on the program and administration needed to run the organization and manage the activities requested.
2. We have presented Column B for the proposed budget for the fiscal year 2019/2020.
3. FTE for the 18/19 fiscal year has been 18.55. The proposed 19/20 Budget proposes an increase to 25.15, a result of the increase in programs like Innovative Tech, Private Fund Development (501c3 Non-Profit), LA Media and Other Programs (INN 6-8).
4. Managing the programs requested and building in the members expectations of having the staff expertise to research potential projects for CalMHSA.
5. Member relations is critical and recognizing that the membership is large/vast/varying and evolving and requires staff resources to succeed in this relationship.
6. Effort and working with associated agencies CBHDA, CIBHS, OAC, and DHCS.
7. Compliance with statutory requirements of the government code, JPA Agreement and Bylaws and DHCS.

8. Meeting member interest in CalMHSA being efficient to assist in regional or joint member projects.
9. The budgeted Direct Staffing and Indirect Costs are 8% of Revenue.

FISCAL IMPACT:

Budget Document

RECOMMENDATION:

Approval of the CalMHSA Proposed Revenue and Expenditure Report – June 30, 2020

TYPE OF VOTE REQUIRED:

Majority vote

REFERENCE MATERIAL(S) ATTACHED:

- CalMHSA Annual Revenue and Expenditure Report – Proposed Budget June 30, 2020

Annual Revenue and Expenditure Report – Proposed Budget June 30, 2020

CaIMHSA

California Mental Health Services Authority

Compassion. Action. Change.

- Budget Narrative & Notes •

Budget Notes

The CalMHSA staff has reviewed the direction from the Board and analyzed the projected programs of CalMHSA as it relates to the projection for fiscal year 2019/20. Revenue projections have been made based upon current estimate of funds to be received and program administrative requirements have been shaped based on size and source of funds expected for each revenue stream.

A. Budget Assumptions and Criteria Applied

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4. Managing the programs requested and building in the members expectations of having the staff expertise to research potential projects for CalMHSA.
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6. Effort and working with associated agencies CBHDA, CIBHS, OAC, and DHCS.
7. Compliance with statutory requirements of the government code, JPA Agreement and Bylaws and DHCS.
8. Meeting member interest in CalMHSA being efficient to assist in regional or joint member projects.
9. The budgeted Direct Staffing and Indirect Costs are 8% of Revenue.

B. Revenue – During Fiscal year 19/20 is Estimated as

1. PEI Sustainability is Budgeted based on prior year experience demand by program partners and the increased MHSA funding to members to support the increased demand of programs.
2. Innovations Technology Suite revenue is projected on Participation by Counties in the Pipeline for approval and expected to participate in 19/20. Cohort 2 counties have joined the Tech Suite and the revenue is based on the Participation Agreement commitments.
3. Suicide Prevention Program Revenue is based upon current participation agreements.
4. Transfers In/Out (Direct Expense) represent a pass through of the Deposits related to the AB 1299.
5. AB1299 admin fee is based on 5% of the AB 1299 deposits.
6. Other INN Programs have been targeted at \$2.8 million. Early Psychosis (5-year program for a total of 8.6m) has been confirmed, pending Participation Agreement.

C. Expenditures

Program Service Expenditures

1. Program Partners and Program Contracts have been budgeted at 80% of Revenues for all programs except CPBHW Fundraising, which is at 95% (not including the Transfers In - AB 1299).
2. Direct Legal Expenses include a budgeted amount related to the legal services related to the increased innovations program.

General and Administrative Expenses

1. General and Administrative Staffing – Staffing services to manage the general and fiscal operations of CalMHSA. The staffing contract with George Hills increases from \$102 per FTE to \$104 per FTE for 19/20 (estimated 2% COLA).
2. Legal Expenses – CalMHSA has retained legal services to provide counsel to the board and support of the governing documents and contracts.
3. Travel and Meeting Expenses – CalMHSA is governed by a Board of Directors and has established standing committees and must comply with the Brown Act to conduct public meetings for JPA business.
4. Other Contracts – CalMHSA has entered into contracts for general information dissemination and information technology.
5. Insurance – CalMHSA procures its general liability insurance from CSAC-EIA on a policy term of July 1 to June 30. Insurance has been increased to prepare for Cyber and HIPPA coverage for 19/20.

California Mental Health Services Authority
2019/2020 Proposed Operating Budget

	(A)	(B)
	Proposed Revised Budget (Feb 2019) 2018/2019	Proposed Budget 2019/2020
Revenues:		
PEI Sustainability	7,400,000	10,000,000
Innovations Tech Suite	35,857,078	23,655,750
Private Fund Development Fees	500,005	-
State Hospital Bed Program	629,314	600,000
Suicide Prevention Program	546,101	500,000
LA Media Campaign	18,385,758	12,000,000
Transfers In - AB 1299	4,000,000	5,000,000
AB 1299 - Admin Fee	200,000	250,000
Other Programs	425,000	2,787,292
Total Revenues	67,943,256	54,793,042
Program Expenses (Direct):		
Program Contracts	45,885,999	39,634,434
Program Management	3,224,832	3,872,128
Other Contracts	75,000	45,000
Legal	250,000	191,401
Transfers Out - AB 1299	4,000,000	5,000,000
Travel & Meetings	200,000	92,500
Total Program Expenses	53,635,831	48,835,463
General & Administrative Expenses (Indirect):		
General & Administrative		
Staffing	1,432,080	1,135,680
Legal	100,000	60,000
Travel & Meetings	80,000	30,000
Other Contracts	25,000	25,000
Insurance	60,000	43,000
Financial Audit	25,000	15,000
Total General & Administrative Expenses	1,722,080	1,308,680
Total Expenditures	55,357,911	50,144,143
Net Income / (loss) From Operations	12,585,345	4,648,899
Prior Year Reserves	2,648,099	2,648,099
Projected Reserves as of June 30	15,233,444	7,296,998
Less: Obligated Reserves	(12,186,755)	(5,837,599)
Total Available Reserves at June 30	3,046,689	1,459,400

Footnotes
(1)
(2)
(3)
(4)
(5)

Staffing (5)	
Total Staff Cost	\$ 5,007,808
% of Revenue	9%

#	Footnotes to Column B	Explanation
(1)	PEI Sustainability	Projection based on counties receiving MHSA Funds and higher demand for some program partners (e.g. Walk in Our Shoes)
(2)	Innovation Tech Suite	FY19/20 Revenue billing per Participation Agreement Budget
(3)	LA Media Campaign	New 2 year contract signed in July 2018 for \$24million. \$12M per year.
(4)	Other Programs	Potential new projects : INN programs. Early Psychosis

**California Mental Health Services Authority
Administrative Expense Allocation
2019/2020 Fiscal year
DRAFT Budget**

	General & Administrative	State Hospital Bed Program	Suicide Prevention - Regional Program	LA Media Campaign	AB 1299	PEI Sustainability Projects	Innovations Tech Suite	Other Programs	Totals	Percent of Total Expenses
Revenue	0	600,000	500,000	12,000,000	5,250,000	10,000,000	23,655,750	2,787,292	\$ 54,793,042	
Direct Expenses (Direct):										
Program Contracts	356,928	\$ 480,000	\$ 400,000	\$ 9,600,000	118,976	\$ 8,000,000	18,924,600	2,229,834	\$ 39,634,434	87.80%
Program Management - Direct		32,448	54,080	735,488		800,384	1,589,952	183,872	\$ 3,872,128	8.58%
Other Contracts						9,000	36,000		\$ 45,000	0.10%
Legal		5,001			6,000	164,400	6,000	10,000	\$ 191,401	0.42%
Transfers Out									\$ 5,000,000	11.08%
Travel & Meetings		7,000	500		5,000,000	30,000	45,000	10,000	\$ 92,500	0.20%
Total Direct Expenses	356,928	524,449	454,580	10,335,488	5,124,976	9,003,784	20,601,552	2,433,706	48,835,463	97.39%
General & Administrative (Indirect):										
General & Administrative	698,714	43,264	21,632	118,976	43,264	123,302	54,080	32,448	1,135,680	2.52%
Staffing	60,000	-	-	-	-	-	-	-	60,000	0.13%
Legal	30,000	-	-	-	-	-	-	-	30,000	0.07%
Travel & Meetings	25,000	-	-	-	-	-	-	-	25,000	0.06%
Other Contracts	43,000	-	-	-	-	-	-	-	43,000	0.10%
Insurance	15,000	-	-	-	-	-	-	-	15,000	0.03%
Financial Audit	(1,152,930)	22,087	22,087	249,265	47,329	269,459	479,599	63,105	0	0.00%
Indirect Staff Cost Allocation to Programs	(281,216)	65,351	43,719	368,241	90,593	392,761	533,679	95,553	1,308,680	2.61%
Total Indirect Expenses	75,712	\$ 589,800	\$ 498,299	\$ 10,703,729	\$ 5,215,569	\$ 9,396,545	\$ 21,135,231	\$ 2,529,259	\$ 50,144,143	100.00%
Total Expenditures	\$ (75,712)	\$ 10,200	\$ 1,701	\$ 1,296,271	\$ 34,431	\$ 603,455	\$ 2,520,519	\$ 258,033	\$ 4,648,899	
Net Increase/(Decrease) Unexpended Funds										

PROGRAM MATTERS
Agenda Item 7.A

SUBJECT: PEI CONTRACTS

ACTION FOR CONSIDERATION:

Approve contract funding for continued implementation of the Phase III Year 3 Statewide PEI Projects in FY 19/20 with the existing contractors in the amounts stated in the staff report, delegate authority to the newly re-constituted Sustainability Taskforce to direct staff on allocation of up to \$2 million in additional funds for similar services if funds become available, and authorize the Executive Director or Chief Operating Officer to negotiate and execute contract extensions or amendments to implement the approved funding.

BACKGROUND AND STATUS:

- At the May 2019 Finance Committee Meeting, members proposed a \$10 million budget for the CalMHSA PEI Projects in FY 19/20. Of this, \$3.7 million is proposed to fund Statewide PEI Project contracts.

Strategies and goals of the Phase III Year 3 Statewide PEI Project

The approved Phase III Year 3 Plan identified priority strategies for implementation: Social Marketing & Informational Resources; and Research, Evaluation and Surveillance. The Social Marketing & Informational Resources strategy can be further delineated into the following activities: 1) Dissemination, 2) Technical Assistance, 3) Networks and Collaborations, and 4) Development of New Outreach Materials to Reach Diverse Communities. These activities support the goals of increased capacities, increased reach and dissemination of materials, and increased usage of materials. Collaboration between program partners will also be critical to achieve goals of the Phase III Year 3 Plan. Attachments 1-9 provide an overview of the work projected for each contractor and each contractor is aware of the proposed reduction in contract awards. After Board action on June 13th, staff will negotiate final scopes of work for each contractor. Staff build the Statewide PEI budget conservatively each year which causes unassigned funds to start the fiscal year. Those funds are then assigned, upon approval, to priority strategies and activities mentioned previously.

Community Stakeholder Involvement in the Statewide PEI Project

All Statewide PEI Project programs and resources have been and are developed with guidance and input from community stakeholders from across California. CalMHSA's community stakeholder involvement is informed by MHSAs Regulations and public health best practices. Community stakeholder involvement in the Statewide PEI Project includes and is not limited to program

planning and implementation, monitoring, quality improvement, and evaluation. Community stakeholders include and are not limited to individuals and peers from fields of mental health, substance use, public health, and education, who represent a diverse range of perspectives including consumers, family members, underserved ethnic and cultural groups, youth, older adults, community clinics, community-based organizations, faith-based organizations, foundations, health plans, research and surveillance institutions, public colleges and universities, county and state agencies, statewide offices, legislative officials, and national policy advocacy groups.

Proposed Contracts:

Contractor	Strategy Activities	Scope of Work Summary
RSE	Dissemination New Outreach Materials	Implement social marketing, media and public awareness, and education activities to expand the reach and impact of Each Mind Matters: California’s Mental Health Movement, including developing new materials for California’s diverse communities.
Each Mind Matters Outreach & Engagement	Dissemination Networks and Collaborations	Further expand the Each Mind Matters partners network and promote grassroots financial partnership opportunities; manage the Each Mind Matters store to expand dissemination of resources and materials to the general population and engage key sectors in Each Mind Matters.
NAMI California	Dissemination Networks and Collaborations	Engage local NAMI Affiliates and NAMI on Campus school clubs to continue and increase youth involvement in outreach and dissemination of NAMI and EMM programs and resources, with special emphasis on California’s diverse communities.
Active Minds	Dissemination Networks and Collaborations	Support and engage California Active Minds Chapters on college campuses to engage a network of student mental health leaders and advocates to outreach and disseminate EMM and Active Minds resources and programs.
California Community Colleges	Dissemination Networks and Collaborations	Support and engage California’s Community Colleges students, faculty and staff to promote and disseminate California Community College Student Mental Health Program and EMM information, tools and resources including supporting the Community Colleges Health Services regional networks.

Contractor	Strategy Activities	Scope of Work Summary
Your Social Marketer	Dissemination Networks and Collaborations Technical Assistance	Provide customized resource navigation, technical assistance, and capacity building support to County Behavioral Health Agencies and their community partners to support local PEI goals and leverage resources between local and statewide efforts.
The Social Changery	Dissemination Network Collaborations Technical Assistance	Provide customized resource navigation, technical assistance, and capacity building support to Community Based Organizations for support local PEI goals and leverage resources between local and statewide efforts, including fostering collaborative networks and implementing CBO mini-grant program.
Directing Change	Dissemination	Implement the seventh annual Directing Change program reaching youth ages 14-25.
RAND	Evaluation	Conduct evaluation of the reach of Each Mind Matters, Know The Signs, and other programs by county and statewide. Support the development of the Statewide PEI Three Year Plan.

Proposed Contract Amounts: (\$3.7 Million Total)

Contractor	Proposed FY 18/19 Contract Amount
RSE	\$1,150,000.00
Each Mind Matters Outreach & Engagement	\$300,000.00
NAMI California	\$200,000.00
Active Minds	\$350,000.00
California Community Colleges	\$400,000.00
Your Social Marketer	\$450,000.00
The Social Changery	\$400,000.00
Directing Change	\$150,000.00
RAND	\$300,000.00
Total Contracts	\$3,700,000.00

The proposed funding amounts and DRAFT contract scopes for FY 19/20 are for the final year for Phase III Year 3, like the final year of a Three-Year MHSA Program and Expenditure Plan.

Beginning in the Summer and Fall of 2019, CalMHSA staff will conduct a PEI Community Planning Process (CPP) that involves stakeholders from throughout California. Locally identified stakeholders will be invited to participate. The intention of the CPP will be to receive input from stakeholders on the priorities for the next Statewide PEI Plan. Staff anticipates that the PEI Plan will result in a menu of stigma, discrimination reduction and suicide prevention activities which will allow counties to select which activities are best for local implementation. Staff hopes to continue to focus on activities such as: 1) Dissemination, 2) Technical Assistance, 3) Networks and Collaborations, and 4) Development of New Outreach Materials to Reach Diverse Communities and other activities which might be determined through the CPP process.

The menu of options will be presented to the CalMHSA Board of Directors in December of 2019. Upon direction of the Board, a competitive process, issuing of a Request for Proposals, will occur in early 2020; mirroring county processes for developing Three Year MHSA Program and Expenditure Plans.

Upon approval, staff will work with Sustainability Taskforce to allocate the anticipated unassigned funds to areas approved by the Board: 1) Stigma and Discrimination Reduction (SDR), 2) Student Mental Health, and 3) Suicide Prevention. The activities will include: 1) Dissemination, 2) Technical Assistance, 3) Networks and Collaborations, and 4) Development of New Outreach Materials to Reach Diverse Communities. Staff will update the Board after the start of the FY 19/20.

Proposed Activities: (\$1.8 Million Total)

Funding Opportunities	Proposed Allocating Amounts
10% increase of current Statewide PEI Contracts	\$370,000
Student (K-12) Mental Health	\$750,000
Social Marketing: SDR and MHSA Successes	\$300,000
Three Year Plan and RFP Consultant	\$150,000
Suicide Prevention and Coordination	\$150,000
Strategic Partnerships	\$80,000
Projected Unassigned Total	\$1,800,000.00

RECOMMENDATION:

Approve contract funding for continued implementation of the Phase III Year 3 Statewide PEI Projects in FY 19/20 with the existing contractors in the amounts stated in the staff report, delegate authority to the newly re-constituted Sustainability Taskforce to direct staff on allocation of up to \$2 million in additional funds for similar services if funds become available, and authorize the Executive Director to negotiate and execute contract extensions or amendments to implement the approved funding.

TYPE OF VOTE REQUIRED:

Majority vote

REFERENCE MATERIAL(S) ATTACHED:

- Attachment 1: DRAFT FY 19/20 Contract Scope of Work Overview – RSE
- Attachment 2: DRAFT FY 19/20 Contract Scope of Work Overview – Each Mind Matters Outreach & Engagement
- Attachment 3: DRAFT FY 19/20 Contract Scope of Work Overview – NAMI California
- Attachment 4: DRAFT FY 19/20 Contract Scope of Work Overview – Active Minds
- Attachment 5: DRAFT FY 19/20 Contract Scope of Work Overview – Foundation for California Community Colleges
- Attachment 6: DRAFT FY 19/20 Contract Scope of Work Overview – Your Social Marketer
- Attachment 7: DRAFT FY 19/20 Contract Scope of Work Overview – The Social Changery
- Attachment 8: DRAFT FY 19/20 Contract Scope of Work Overview– Directing Change
- Attachment 9: DRAFT FY 19/20 Contract Scope of Work Overview – RAND Corporation

Attachment 1:

DRAFT FY 19/20 Contract Scope of Work Overview

RSE

In Phase III Year 3, RSE will build on CalMHSA's original investment – raising awareness, inspiring action, and supporting activities that will expand California's Mental Health Movement. Our grassroots approach will provide a statewide infrastructure that will grow the Each Mind Matters (EMM) movement in the local, diverse communities of California's counties. Our approach will also implement targeted programs and education that reach California's Latino communities. The EMM movement will reflect collective efforts that aim to prevent suicide, improve student mental health and reduce the stigma and discrimination associated with mental illness.

Each Mind Matters Public Awareness and Education

- Maintain EMM engagement through an integrated communications plan for social marketing strategies statewide that can be leveraged locally
- Collaborate with EMM, Your Social Marketer, The Social Changery, Active Minds, NAMI, and Foundation of California Community Colleges (FCCC) in dissemination and usage of materials and resources
- Maintain, review and refine EMM family of websites including EachMindMatters.org; SanaMente.org; WalkInOurShoes/PonteEnMisZapatos.org; SuicideIsPreventable/ElSuicidioEsPrevenible.org;
- Develop and/or adapt materials to meet local PEI needs

Diverse Communities and Special Populations

- Engage key stakeholders (County Behavioral Health Agencies, Ethnic Service Managers, Community Based Organizations and others) to broadly disseminate existing tools and resources
- Based on findings from various diverse communities' reports and stakeholder feedback, develop and/or adapt culturally responsive campaign materials for mental health promotion and prevention of mental illness and suicide to:
 - Enhance the SanaMente campaign
 - Address gaps, new/emerging threshold pops, and special pops at most risk for suicide, such as men.

Evaluation

- Review, and address as needed, the need of a targeted evaluation with direction from CalMHSA and partners at National Opinion Research Center (NORC)
- Coordinate with RAND on CalMHSA external evaluation development and execution, as needed

Attachment 2:

DRAFT FY 19/20 Contract Scope of Work Overview

Each Mind Matters

In Phase III Year 3, the Each Mind Matters (EMM) team will be primarily responsible for building EMM partnerships and sustainability. This will include developing relationships with larger statewide guilds, associations and state agencies to engage and integrate EMM. Through these relationships, will pursue grassroots funding efforts to support EMM integration; in doing so, will be a critical partner to the CalMHSA Fund Development Project. As the Fund Development Project explores multi-million-dollar funds to support CalMHSA efforts, O&E will explore smaller, more grassroots contributions. The O&E team will be responsible for being the public “face” of EMM, attending conferences, tabling, and managing the EMM online store. Finally, as directed by the Board, the team will also create the infrastructure for Each Mind Matters to become a 501(c)(3) organization.

Developing community partnerships and sustainability opportunities for Each Mind Matters

- Participate in grant writing opportunities with partners to expand the integration and reach of EMM
- Collaborate with CalMHSA Fund Development Project, keeping them apprised of smaller grassroots funding in EMM that can be leveraged for larger fund development opportunities

Statewide Community Outreach & Engagement

- In coordination with other contractors, implement strategic outreach plan
- Coordinate with program partners to identify EMM volunteers who can be dispatched to attend further events beyond those identified in the strategic outreach plan; develop a reporting requirement for volunteers and inform counties of any local EMM ambassadors
- Develop and maintain partnerships with previous partners, grantees and state-level and local organizations; as appropriate, share information with program partners to ensure these partners continue to receive EMM technical assistance and resource navigation

Dissemination

- Manage the EMM store including creating a business plan for FY 19/20 and completing a summary of sales report at least twice a year
- Disseminate and track materials throughout the community, based on the strategic outreach plan

Attachment 3:

DRAFT FY 19/20 Contract Scope of Work Overview

National Alliance on Mental Illness California

As part of the nation's largest grassroots mental health organization, National Alliance on Mental Illness California (NAMI) will utilize their extensive network of 62 statewide affiliates to continue to: reach underserved populations, expand the dissemination of the Each Mind Matters (EMM) program materials and increase youth education.

Contractor will continue to engage underserved communities, increasing statewide reach and membership within racial, ethnic, and diverse communities to become part of the NAMI network to improve peer and family-based mental health and wellness services. Through statewide trainings and implementation of local programs, NAMI California and its affiliates statewide will reach local leaders from diverse communities to embrace and support EMM messaging and materials to reduce stigma and increase knowledge of mental health across all communities.

- NAMI will coordinate with Active Minds and other youth centric organizations to increase youth voices in Mental Health awareness and stigma reduction. NAMI will offer support, coordination and technical assistance to NAMI on Campus High School (NCHS) chapters to conduct outreach and dissemination of EMM materials and messaging; and utilize EMM materials to students, staff and faculty on high school campuses including Directing Change.
- NAMI will disseminate and promote the EMM toolkit and dissemination plan with Affiliates including trainings, technical assistance, and learning collaboratives in order to support successful use and adoption of relevant EMM materials at the local level.
- NAMI will leverage outreach opportunities to incorporate EMM into presentations, workshops, conferences, community meetings and other events as well as table exhibiting to promote EMM materials.
- NAMI will distribute EMM materials at all statewide trainings to engage local leaders from diverse communities, especially Spanish-speaking Californian communities

Attachment 4:

DRAFT FY 19/20 Contract Scope of Work Overview

Active Minds

Active Minds' objective is to build, support and activate an engaged network of student mental health advocates throughout the state of California. Through engagement and intensive support, Active Minds' student network will reach diverse audiences with Each Mind Matters (EMM) materials and will work towards increasing knowledge and changing attitudes and behaviors around mental health on campuses in California.

Chapter Capacity Building

- Support and invest in Active Minds California Chapters through technical assistance, leadership training, educational programming and resource provision
- Manage fund distribution to student-led organizations to ensure student-led mental health programs and outreach on campuses

Community Engagement

- Build a network of student mental health advocates throughout California ensuring elevation of the transition age youth voice in stigma reduction and suicide prevention
- Coordinate with NAMI to build a link between high school NAMI on Campus chapters to college campus activism
- Ensure a diverse statewide network of student mental health advocates who are knowledgeable about EMM and committed to mental health advocacy

Coordination and Dissemination

- Activate Chapters and EMM student ambassadors for effective adaptation and dissemination of EMM materials and documentation of distribution
- Hold campus and community educational events including Send Silence Packing exhibits and Speakers Bureau presentations that will reach large scale diverse student audiences with EMM materials

Attachment 5:

DRAFT FY 19/20 Contract Scope of Work Overview

Foundation for California Community Colleges

The Foundation for California Community Colleges (FCCC) Student Mental Health Program (SMHP) will promote and disseminate mental health information, tools and resources including Each Mind Matters (EMM): California's Mental Health Movement programs and materials within the FCCC system.

- Maintain project website including resource database and conduct activities to support awareness and traffic to the website
- Leverage FCCC Health Services regional structure to increase dissemination, usage and capacities
- Develop and implement a strategic plan to increase dissemination, usage and capacities and promote EMM to FCCCs
- With Active Minds and NAMI, provide support to student leaders to promote local chapter/club activities, outreach, and usage of EMM and SMHP tools and resources
- Recruit, train and coordinate FCCC students as mental health and wellness ambassadors (internships) to complete peer outreach to transitional age youth (TAY) about mental health and wellness tools, resources, materials, etc. (EMM, SanaMente, Crisis Text Line, Know the Signs, Kognito, etc.)

Attachment 6:

DRAFT FY 19/20 Contract Scope of Work Overview

Your Social Marketer

Your Social Marketer will provide resource navigation, customized technical assistance and capacity building to County Behavioral Health Agencies (CBHAs) and their community partners. Resource navigation and technical assistance will include, but not be limited to, communication and facilitation of sharing of Each Mind Matters (EMM) and partner programs and resources, efforts to increase local capacities and skills to fully engage in the EMM movement, subject matter expertise in stigma and discrimination reduction and suicide prevention, guidance and support of local implementation of targeted approaches.

Each Mind Matters

Collaborate with Program Partners in dissemination, technical assistance and capacity building activities to ensure promotion and engagement of EMM statewide, to include:

- Review and support content development of social marketing, website, and new materials
- Participate in outreach events/activities such as resource tables, presentations and conferences as capacity allows
- Refresh existing EMM resources and materials as needed
- Assist county agencies and their partners with utilizing EMM materials

County Technical Assistance and Support

- Develop and implement EMM County Technical Assistance program plan, in coordination with The Social Changery's Community Technical Assistance program as applicable
- Deliver EMM resource navigation and technical assistance to all contributing counties as directed by CalMHSA and responding to county requests for resource navigation and technical assistance support

Attachment 7:

DRAFT FY 19/20 Contract Scope of Work Overview

The Social Changery

In Phase III Year 3, the Social Changery will be responsible for providing technical assistance and resource navigation to community agencies. The Social Changery will work closely with the Each Mind Matters (EMM) team to identify appropriate community partners that should receive ongoing technical assistance and resource navigation. Furthermore, The Social Changery will provide technical assistance and support to mini-grantees, including working with counties to identify grantees, collaborating with grantees to establish workplans, creating plans with grantees regarding ongoing use and integration of EMM, and creating county-specific reports regarding grantee activities.

Community technical assistance and resource navigation

- Develop and implement a technical assistance plan prioritizing structured technical assistance
- Develop a dissemination plan based on existing gaps in dissemination to diverse populations
- Develop outreach/engagement/dissemination report describing CBOs engaged within each county

Mini-grants

- Administer mini-grant program
- Provide technical assistance and ongoing support to mini-grantees
- Implement sustainability plan for mini-grantees to continue EMM integration and engagement beyond their funding cycle

Collaborations

- Support to identify partners/sectors that have not been engaged by EMM
- Support the development of new outreach materials and dissemination plan for new outreach materials
- Support the ongoing refinement and updating of campaign websites and messaging
- Lead and collaborate with other program partners on EMM Resource Center content management and curation
- Provide Subject Matter Expertise (SME) in Stigma and Discrimination Reduction, Cultural Competency, Peer Engagement, Student Mental Health (SMH), Trauma Informed Care and Resiliency to programs, activities, initiatives and efforts of CalMHSA PEI project, EMM, and program partners in order to ensure high quality products, services and impacts.

Attachment 8:

DRAFT FY 19/20 Contract Scope of Work Overview

Directing Change

The Directing Change Program and Film Contest is part of Each Mind Matters (EMM): California's Mental Health Movement. The program educates middle school and high school students, and TAY, about mental health, suicide prevention, and how to get help for themselves or others by creating short films that are used to promote awareness, education and advocacy efforts on these topics. The program provides lessons plans as well as trainings and technical assistance to schools around implementation of AB 2246, staff trainings, youth engagement and postvention. Directing Change is a non-profit organization and will continue to work with Your Social Marketer, Inc to implement the program.

- Host and maintain program website and social media channels Create promotional and educational materials
- Program promotion with students, youth, teachers, schools, districts, community-based organizations and youth services providers across the state
- Program implementation to include recruitment and training of judges, management of submissions and coordination of awards and recognitions

Attachment 9:

DRAFT FY 19/20 Contract Scope of Work Overview

RAND

RAND will be responsible for supporting CalMHSA in examining potential changes in mental health metrics and the reach of key Each Mind Matters programs and potential changes within each county. Furthermore, RAND will be providing CalMHSA with ongoing technical assistance and consultation, assisting with planning for future phases of the Statewide PEI Project, and supporting other efforts related to PEI. Evaluate key activities at the direction of CalMHSA staff.

PROGRAM MATTERS
Agenda Item 7.B

SUBJECT: CALIFORNIA PARTNERSHIP FOR BEHAVIORAL HEALTH AND WELLBEING (CPBHW)

ACTION FOR CONSIDERATION:

None, information Only

BACKGROUND AND STATUS:

Below you will find an update on the formation of California Partnership for Behavioral Health and Wellbeing (CPBHW). Attachment A and B include a thorough overview of the process, decisions and timeline of key events that brought us to the formation of the CPBHW as outlined below:

- a) **History:** A review of the history of the Public Private Partnership,
- b) **Rationale:** The reasons for pursuing this option,
- c) **Process:** An outline of the methods employed such as:
 - i. a feasibility study and case statement,
 - ii. convening of a 15-member leadership council,
 - iii. a yearlong strategic planning designed to supplement CalMHSA prevention efforts,
 - iv. the recommendation to form a 501c3 with private sector funding;
- d) **Reminder:** CalMHSA financial participation for launching CPBHW ends June 30, 2019. Private sector funding starts July 1. Seed money and start-up funds are being secured based on private sector pledges, with additional private sector funding is being requested to enhance and leverage CalMHSA program funding.
- e) **Private Sector contributions:** If progress goes as planned, we hope to raise \$5 million in the first year, of which \$4 million will go to enhance and expand CalMHSA prevention programs.
- f) **CPBHW IRS 1023 Exemption Application:** The application for Recognition of Exemption under Section 501(c)(3) of the Internal Revenue Code was submitted last week. The first CPBHW Board meeting will convene via teleconference on June 19, 2019. The Board consists of ten members, including two CalMHSA members and the Executive Director of CalMHSA.
- g) **Formation of CPBHW:** George Hills staff will be assisting the formation of the CPBHW with the expectation of full reimbursement for time and effort spent. In the next three to six months CPBHW will be seeking full time staff, offices, and other basic operating requirements.

- h) **MOU:** An MOU is being developed to memorialize the relationship between CalMHSA and CPBHW to be presented to the CalMHSA and the CPBHW boards when drafts are ready.

FISCAL IMPACT:

None

RECOMMENDATION:

None, information Only

TYPE OF VOTE REQUIRED:

None

REFERENCE MATERIAL(S) ATTACHED:

- Attachment A: Overview of Public Private Partnership
- Attachment B: Timeline of Key Events in Formation of CPBHW



CalMHSAs Public Private Partnership

An Overview

A Commitment to Population-based Behavioral Health Changes Statewide

The work on CalMHSAs/counties' statewide population-based prevention and early intervention was first established with an original commitment by 56 counties. Those counties funded a comprehensive plan to eliminate stigma, prevent suicides and improve student mental health and many of those counties continue funding to this day.

Given the long-term financial commitment required to effect population-based behavioral health changes (akin to smoking cessation efforts), the Board Finance committee worked with staff to identify options for revenue generation to assure a sustainable and broad-reaching prevention effort. Among the options identified was pursuit of private sector funding through a public private partnership. This approach would not only leverage what counties are investing (past, present and future), but would enable CalMHSAs and counties to identify and secure additional perspectives, needs and resources to statewide prevention and early intervention efforts, while connecting to audiences otherwise unreachable.

Feasibility Study Background

In 2016, CalMHSAs member counties contracted LCG to conduct a feasibility study to assess whether the private sector would commit funding to expand CalMHSAs/counties' prevention and early intervention efforts beyond that funded by counties.

Conducted from January-August 2016, feasibility study tasks included:

- Developed feasibility study documents (case for support, study objectives, chart of gifts, interview questionnaire, master prospect list, invitation letters, call script, acknowledgment letters.)
- Designed the study messaging, strategy and assumptions
- Completed comprehensive staff orientations and training
- Researched and created Master Prospect List of 450 California companies and foundations
- Conducted an orientation for the Board of Directors
- Managed study participant scheduling and follow up
- Conducted and analyzed interviews, testing a fundraising goal of \$75M over five years
- Provided preliminary and final Report of Findings and Recommendations

Given CalMHSAs had a an extremely limited number of private sector contacts, the vast majority of the calls made by CalMHSAs staff and LCG to confirm participation were cold contacts. Of the 450 cold-call invitations, 8% (34) agreed to an interview, 10% (46) declined an interview, 10% (43) were unreachable due to position or address change, and 72% (325) did not provide a response to our cold call.

CalMHSAs Board Members were invited to participate in prospect identification. For most nonprofits, the majority and best donor prospects are identified by Board members who are business leaders with community connections. However, given CalMHSAs's non-traditional Board composition (county

directors of behavioral health departments), no member of the CalMHSA Board submitted prospect names or invited others to participate in the study.

Feasibility Study Findings were reported to the CalMHSA Board in August 2016 and included:

- The range of funding identified ranged from a low of \$3.04M to a high of \$13.46M.
- Potential for a \$10M gift was identified.
- Funding to supplement *NOT* supplant county MHSA support of PEI was identified as critical to securing private sector investment.
- *Most critically, nearly all gifts were contingent upon greater definition of measurable goals, objectives, spending details, and partnerships.*
- 85% of study participants viewed preventing mental health challenges as a 'high' or 'top' priority.
- 77% of study participants understood the need to raise funds and thought the lead gift of \$10M was realistic.
- 92% thought the goal of \$75M was realistic.
- 96% agreed that forming a state-wide council of knowledgeable leaders was a good next step should a campaign not yet be viable.
- 65% of participants indicated their business or foundation would consider a gift and 52% would consider a five-year pledge.
- CalMHSA staff provided extensive background and strategy input, yet additional study tasks proved daunting in addition to existing responsibility.
- Results were impacted as a result of CalMHSA having no database of prospects or donors.
- CalMHSA leadership had to learn fund development techniques and execute simultaneously.
- Confidence in CalMHSA's goals, spending plan and partnerships was unclear.
- Majority of corporate and foundation giving is directed to nonprofit 501(c)3 organizations which is addressable.
- Sample size was small but impressive as a first start.

Feasibility Study Recommendations:

Based upon study findings and challenges, LCG recommended and the CalMHSA Board subsequently voted to proceed as follows:

- CalMHSA was primed to establish a Leadership Council as an intermediary step in securing support for a public private partnership but was not ready to launch a campaign.
- Develop a strategic plan to include state-wide business and foundation partners.
- Define public private partnership in greater detail especially in terms of measurable goals, objectives, spending details, and partnerships.
- Define and seek funding to seed projects of a public private partnership.
- Develop a phased approach to securing funding.
- Identify key performance metrics to monitor success of public private partnership.
- Measure impact of public awareness campaign on demand for treatment services as a result of reducing stigma/discrimination.
- Redefine messaging to include broader outreach, including treatment
- Commit 1.5 FTEs to support a Leadership Council and establish development (fundraising) capacity.

Leadership Council: Forming the Public Private Partnership

In late August 2016, CalMHSA's Board of Directors approved proceeding with LCG's recommendations to establish an ad hoc group of statewide private sector leaders to advise CalMHSA about formation of a public private partnership. The ad hoc group was to be charged with addressing concerns identified in the Feasibility Study in order to draw private sector funders to partner and supplement the critical work of CalMHSA around prevention and early intervention efforts. In October 2016, a contract was approved for work to begin December. As part of the contracting process LCG communicated to staff that the fundraising would not begin until year three, once greater definition of measurable goals, objectives, spending details, and members of a public private partnership had been defined.

With the focus of leveraging CalMHSA efforts and county resources—and to further break down functional siloes in mental health resources—CalMHSA and LCG began formation of the Leadership Council and the subsequent Public Private Partnership. The process began with numerous preparatory steps in order for CalMHSA to attract statewide leaders to volunteer:

- Development of communication and management tools, such as revision of the Case to address questions and concerns identified in the Study, defining the Leadership Council purpose and volunteer position description, identifying and training on use of a donor data base, etc.
- Definition of CalMHSA's funding needs in far greater detail than presented in the original Case Statement. This step took a significant amount of time over more than six months and was challenging for the CalMHSA staff to quantify desired funding in terms of anticipated impact, measurable goals, objectives, spending details, and partnerships, yet this information is critical to the ability to secure funding as was identified during the Study.
- Training and orientation of staff to recruit and confirm participation on the Leadership Council, including development of call scripts.
- Outreach and recruitment of prospective Leadership Council members from a list of 97 prospects most likely to participate.
- Staff orientation regarding the systems needed for securing and managing funds.
- Ongoing efforts establishing greater definition of measurable goals, objectives, spending details, and partnerships.

The next step toward a public private partnership has been to engage a group of statewide leaders to advise CalMHSA about the form and focus of the public private partnership.

From January 2018-April 2019, a Leadership Council was convened to serve in advisory capacity to CalMHSA's Board of Directors and management. The goal of the Leadership Council is ultimately to form a public private partnership that will contribute private sector resources to expand the reach and impact of what CalMHSA/counties are already doing to advance the emotional wellbeing of Californians. Toward that end, Leadership Council members were recruited to:

- Advance Californian's knowledge, attitudes and behaviors for improved emotional well-being and early detection of mental illness;
- Promote a more integrated care delivery model by identifying existing problems across systems and designing innovative solutions that improve access to appropriate levels of intervention, treatment, recovery, and mental health promotion;
- Secure and distribute funding for best practice strategies impacting needs along the mental health continuum from Prevention and Early Intervention to Treatment and Recovery.

Leadership Council members began a year-long strategic planning process to develop recommended priorities of the public private partnership. Founded on the four components of the Model of Behavioral Health Continuum of Care*—*Promotion, Prevention & Early Intervention, Treatment, Recovery* (*developed by the Institutes of Medicine/SAMHSA)—the Leadership Council evaluated and identified shared challenges around mental health that public and private sectors can jointly address to better serve Californians.

The Council identified 32 key challenges that their private sector constituencies and communities most commonly face. Ultimately members prioritized four key challenges on which they recommend the public private partnership focus. They also thoughtfully prioritized some of the existing resources of CalMHSA and other organizations to be scaled across the state in order to address the challenges identified.

The Leadership Council also assessed which organizational structure would best serve the needs and interests of the public private partnership. Among the options considered were a) using CalMHSA's JPA, b) inviting an existing nonprofit foundation to serve as the fiscal intermediary, or c) establishing an independent nonprofit. Given the clear preferences expressed in the Study and the Council's desire to assure total focus on the goals and objectives identified by the Leadership Council, it was determined that an independent nonprofit organization is the preferred vehicle to best address private sector and CalMHSA objectives.

Thus, the public private partnership was established as the California Partnership for Behavioral Health and Wellbeing (CPBHW), a nonprofit 501(c)3 organization. The purpose of the California Partnership for Behavioral Health and Wellbeing is to:

- Solve common public and private behavioral health challenges;
- Secure and coordinate resources—financial and otherwise—to advance the emotional wellbeing of Californians; and
- Promote statewide strategies to increase awareness, improve access to behavioral health services and advance the emotional health of Californians.

The goals of CPBHW are to:

- Serve as a conduit to scale existing best practices state-wide;
- Pilot initiatives that show promise to improve Californians emotional wellbeing through prevention, early intervention, access to treatment and recovery/resiliency efforts;
- Evaluate and monitor implemented initiatives for effectiveness;
- Manage implementation of initiatives; and
- Serve as a thought leader and catalyst to convene collaborative partnerships between the private, public and nonprofit sectors that seek to effect system change and encourage early help seeking behaviors of Californians around behavioral health.

The Leadership Council concluded its advisory role in April 2019. Some of the Leadership Council members will continue on the Board of the Directors for the California Partnership for Behavioral Health and Wellbeing (CPBHW). The next steps in formalizing the public private partnership include the following tasks, many to be carried out concurrently:

- Recruit additional members for the Board of Directors (9 recruited to date)
- Orient Board of Directors and conduct Prospect Identification and Evaluation with each member.

- Finalize Board-approved operational plans including policies, board manual, operating guidelines, and staffing needs for the independent organization.
- Secure funding for priority areas, including support from CPBHW Board, past study participants, new prospects with shared interest in work of CPBHW.
- Customize fundraising systems and tools to CPBHW and priorities identified by Leadership Council (naming opportunities, pledge card, acknowledgment letters, solicitation/briefing materials, gift reports, donor recognition and stewardship plan, etc.).
- Confirm short- and longer-term operational structure and systems.
- Hire, orient and train staff to oversee the initiatives and objectives identified by business leaders across the state.
- Carry out the initiatives funded by donors.
- Implement donor recognition and stewardship.
- Continue seeking on-going support.
- Continue implementation of CPBHW initiatives.

CPBHW: Expanding CalMHSAs/Counties' Impact

We are now on the precipice of realizing the objective established by CalMHSAs' Board in 2016. Multiple private sector leaders have already committed to joining the CPBHW Board and have verbally indicated their financial support for the initiatives of CPBHW. Study participants who indicated contingent support previously will soon be invited to invest in CPBHW as will an extensive list of California employers, health care organizations, and foundations.

Tragedies resulting from preventable mental health challenges are reported daily in the national news. In California, millions more suffer silently with some form of a mental health need; 2.2 million annually, according to the 2007 California Health Interview Survey.

There has never been a more critical time to work collectively to alter how we address the emotional challenges among our families, employees, students, and communities at large. Just as our state has set the standard and led the nation in other prevention efforts, CalMHSAs/Counties' establishment of the public private partnership (CPBHW) is moving us toward a new model of working together. Together, we will advance prevention and early intervention, significantly improve early access to treatment, and ultimately, improve the emotional wellbeing of Californians.

Timeline of Key Events in Formation of CPBHW

- November 2008 CMHDA recommends that the County Mental Health Directors form a joint power authority (JPA) for the purpose of acting jointly when state and regional initiatives are needed.
- Seven County Mental Health Directors established a Joint Powers Authority to create participation agreements that permitted them to commit to multi county projects.
- During the same time period, the State Department of Mental Health had not spent several hundred million dollars of MHSAs funds dedicated to State Wide Prevention and Early Intervention (SWPEI).
- CalMHSA leadership negotiated with California DMH to contract for \$146 million of one-time SWPEI funds with the stipulation that counties agreed to assign a portion of their funds to CalMHSA for creation and implementation of an OAC approved SWPEI plan.
- Fifty-six counties agreed to participate, while CalMHSA created an advisory committee of stakeholders, County representatives, and subject matter experts to assist with the preparation of a comprehensive plan to eliminate stigma, prevent suicides, and improve student mental health.
- In the winter of 2009, the CalMHSA statewide PEI plan was submitted to and approved by the Oversight and Accountability Commission (OAC).
- Within nine months of OAC approval, twenty-five contracts were issued by CalMHSA to implement and evaluate the plan.
- In June 2015 the Board realized there was declining funds from county participation to sustain a robust statewide campaign, and requested that staff pursue alternative funding strategies, from legislation targeting the statewide MHSAs administrative funds, to county specific projects, to new regional projects and finally to the private sector.
- In June 2016 the CalMHSA Board approved a preliminary feasibility study to determine if there was private sector interest in sustaining and enhancing the SWPEI. The feasibility study demonstrated that there was indeed foundation, corporate, and health system interest in enhancing the stigma reduction, suicide prevention, and student mental health initiatives.
- The feasibility study showed that there was interest from the private sector and that a core group of private foundations, corporations and health systems were willing to form a leadership council to pursue a public private partnership. The leadership council met for over a year, primarily creating a strategic plan that linked effectively with CalMHSA priority prevention efforts and projects. The council then recommended a 501c3 as the best vehicle for bringing private sector funds to best leverage with the public programs previously funded by CalMHSA.

- November 2018 CalMHSA Board Approved to continue with submission of an application for formation of 501(c) (3).
- The current status of the non-profit is that its name is California Partnership for Behavioral Health and Wellbeing. There are 10 members, two of them being CalMHSA board members as well as the Executive Director of CalMHSA as ex-officio on the Board. The first CPBHW Board meeting is June 19th. At that time there will be a review of the IRS 1023 application, establishment of a schedule for Board meetings, a presentation of the Bylaws of the Board, and review of conflict of interest policies.
- Starting on July 1st 2019, the CPBHW will be funded by private sector funds for both administration and for the funding of the priority programs efforts, most of which are CalMHSA projects to be enhanced.
- An MOU is being developed between the two entities clearly delineating responsibilities and funding streams. The plan is to have within 6 months a fully functioning independent nonprofit, and during the next six months George Hills staff will provide interim administrative support funded by the nonprofit.

GOVERNANCE
Agenda Item 8.A

SUBJECT: PERIODIC REVIEW OF GOVERNING DOCUMENTS

ACTION FOR CONSIDERATION:

Direction to counsel and staff to review documents and review current practices and report back to Board with any suggested changes.

BACKGROUND AND STATUS:

The Bylaws were last reviewed two years ago. The Procurement Policy has not been updated since 2012. Due diligence includes periodic review of documents to make sure they comply with law and to harmonize the documents and current practices.

RECOMMENDATION:

Direction to counsel and staff to review documents and review current practices and report back to Board with any suggested changes.

TYPE OF VOTE REQUIRED:

None. Direction to counsel and staff is sufficient.

REFERENCE MATERIAL(S) ATTACHED:

- None

GENERAL DISCUSSION
Agenda Item 9.A

SUBJECT: REPORT FROM CALMHSA PRESIDENT

ACTION FOR CONSIDERATION:

None, information only

BACKGROUND AND STATUS:

CalMHSA President, Dawan Utecht, will provide general information and updates regarding the JPA.

- INN Tech Suite Status Report to the Subcommittee of the MHSOAC
- RFP Update
- MHOAC Student Mental Health Project
- General

FISCAL IMPACT:

None

RECOMMENDATION:

None, information only

TYPE OF VOTE REQUIRED:

None

REFERENCE MATERIAL(S) ATTACHED:

- INN Tech Suite Status Report to the Subcommittee of the MHSOAC

Innovation Technology Suite Status Report for the Innovation and Technology Subcommittee of the MHSOAC May 31, 2019

Innovation Technology Suite

INTRODUCTION

California is leading the way in finding innovative solutions to bring technology into our behavioral health system of care. Consistent with the pioneering spirit California is known for, this collaborative is an exciting opportunity to help shape the future and improve accessibility and outcomes to meet the needs of people across the state.

The Innovation Technology Suite project leverages innovative digital applications on smartphones and other mobile devices to empower consumers by engaging them as full partners in their behavioral health care, supporting self-care, and offering access to people who face barriers in engaging with a face-to-face provider.

Beyond the stated learning outcomes, the 15 participating cities/counties are at the forefront of innovation to understand how technology is introduced and works, within the public behavioral health system of care. Every aspect of this project has a learning component. The last eight months have focused the cities/counties and the Tech Suite team on developing a sound and sustainable infrastructure to address gaps and unforeseen challenges.

“Implementing digital health technology can be complicated and time-consuming. On average, it takes hospitals **23 months** to go from identifying a digital innovation need to scaling a digital solution to meet that need.”

American Medical Association Digital Literacy Playbook

With the OAC’s approval for Cohort 2 counties to join the Tech Suite, the Commission provided additional support and opportunity for this important work. The Commission also identified several thoughtful considerations which the Tech Suite project has considered.

Progress Made

LEARNINGS

The Innovation Tech Suite has focused the last few months on developing a more robust infrastructure to support the sustainability of the Tech Suite. The most significant lesson learned to date is that moving private sector technology into the public sector behavioral health system is a challenge to the project, and a substantial change to the overall behavioral health system of care.

EXHIBIT 1 – Lessons Learned - Key Topics Reported by Counties

City/County	<ul style="list-style-type: none"> • Set and manage expectations around innovation, more than just that technology is a new modality of care • Thorough understanding of the technology and related barriers is critical • Sponsorship and shared vision among leadership • Dedicate sufficient resources; technology readiness requires more staff time than anticipated • Open dialogue between counties, increase communication • Clearly define county scope and roles • Understand the science behind the technology to help inform future procurements • Consider the limitations of the target population and their access to technology. Eliminate barriers for the client/user
Project Management	<ul style="list-style-type: none"> • Understand the process of changing and the emotional journey • Criticality of infrastructure (project management, governance, risk management, procurement and contracting) • Proving more time consuming to aggregate and prioritize the wide-variety of opinions from all involved in the implementation of each technology. Takeaway is to work with smaller groups (1-2 counties at a time) on individual projects/technology implementations and share learning with the larger group.
Community/Peer Level	<ul style="list-style-type: none"> • Steep learning curve to understand digital literacy • Communicate Peer role early
Vendors	<ul style="list-style-type: none"> • Rigorous contracting and contract management is needed • Establish more protections for counties and CalMHSA

The focus of the project remains on the five shared goals shown below, however change at the scale of this project necessitates a robust readiness and change management approach. The project team has focused on building in activities to address these areas for both the project team and the community.

Five Shared Goals

1. Detect and acknowledge mental health symptoms sooner.

2. Reduce stigma associated with mental illness by promoting mental wellness.
3. Increase access to the appropriate level of support and care.
4. Increase purpose, belonging and social connectedness of individuals served.
5. Analyze and collect data to improve mental health needs assessment and service delivery.

In addition, ongoing learning has occurred as an integrated part of the project. A number of key accomplishments support both the progress and the learning for the cities/counties, the collaborative overall and the larger mental health community.

EXHIBIT 2 – Key Accomplishments

TIME	ACCOMPLISHMENTS
OCT 2018	<ul style="list-style-type: none"> • Hired a statewide Peer & Community Engagement Manager.
NOV 2018	<ul style="list-style-type: none"> • Hosted in-person collaborative meeting between Cohort 1 & Cohort 2, providing a demo of Mindstrong and 7 Cups, a message mapping session with marketing and outreach vendor RSE, and evaluation overview with UCI.
DEC 2018	<ul style="list-style-type: none"> • Engaged with technology vendor Cambria Solutions for expertise in establishing infrastructure, implementation and project management. • Facilitated workshops with Cohort 1 counties to identify business process integration and user stories to address challenges with the existing technologies.
JAN 2019	<ul style="list-style-type: none"> • Developed and adopted Collaborative Budget Model. • Implemented Mindstrong with Diary Card at Harbor UCLA DBT Clinic. • Facilitated workshops with Cohort 2 counties (SF and Marin) to identify business process integration of the technology with current county/clinic processes, as well as user stories to address challenges with the existing technologies.
FEB 2019	<ul style="list-style-type: none"> • Developed and adopted Peer Staffing Model (see attachment). • Developed and adopted Innovation Tech Suite Vision and Purpose Statements to provide unifying guidance to the project.
FEB 2019	<ul style="list-style-type: none"> • Conducted a collaborative-wide, in-person meeting to introduce key concepts to prepare for implementation including product governance, testing. • Established a project governance framework including a process to submit, review, vet, prioritize and approve/disapprove product change requests.
MAR 2019	<ul style="list-style-type: none"> • Trained UCI in the Mental Health Consumer and Recovery Movement and created opportunities for Peers to participate in the evaluation. • Trained Cambria and RSE in the Mental Health Consumer and Recovery Movement to work on language, messaging, and project approach.
MAR 2019	<ul style="list-style-type: none"> • Developed and approved 7 Cups Product Roadmap and Timeline. • Developed Terms of Use document to support explanation of the technologies and the risks of use.

APR 2019	<ul style="list-style-type: none"> • Conducted a collaborative-wide, in-person testing workshop to introduce the testing process and determine if the changes made to 7 Cups would meet the cities/counties needs. • Quarterly report from UCI. • Kern County's first pilot program was completed. UCI conducted interviews of client users. • Developed and adopted Tech Suite branding concept "Help@Hand".
MAY 2019	<ul style="list-style-type: none"> • Trained Mindstrong in the Mental Health Consumer and Recovery Movement. • Developed county-specific implementation plans. • Developed and launched an RFSQ and Proof of Concept approach to identify and introduce additional technologies into the Tech Suite. • Facilitated a SoCal Peer Summit to engage in a strategy session to integrate peer perspective to project solutions, build upon foundational knowledge, and define clear avenues to partner in evaluation.

SETTING A VISION

Leveraging the collective thinking from multiple workshops the Leadership approved a unifying vision statement to give purpose and context to the long-range goals of the project. This was an important step in applying learning and moving forward. Accompanying the vision is a statement of purpose and guiding principles to give greater context to operational and governance issues such as voting and communication.

“Save lives and improve the wellbeing of Californians by integrating promising technologies and lived experiences to open doors to mental health support and wellbeing.”

Innovation Technology Suite Vision Statement

BUILDING A BRAND

Building upon the vision, the collaborative has developed a brand for the Innovation Tech Suite. Help@Hand is a clear and memorable explanation of the Technology Suite which will serve as a foundation for social media handles, slogans, digital media all which can be tailored to individual county needs.

PRIORITIZING SAFETY

The project has prioritized expanding access using the Technology Suite while balancing how to keep people safe in an innovative and dynamic learning environment. There has been much learning based on the unique user dynamics which had not been anticipated. For example, how to gather accurate data when a user may not consistently be in possession of their phone, or



how to use the technology suite and minimize the draw on battery life and cell phone data plan so users aren't depleted should a crisis occur.

Additionally, each implementation is unique and county nuances influence selection and implementation beyond budget and stakeholder input, including factors such as individual risk appetite. Initial exploration of the technology brought enthusiasm and excitement to implement. While the enthusiasm and excitement remain, further work to prepare the solutions for implementation yielded varying degrees of comfort with the products and wide-ranging opinions about features and functionality.

Examples of county generated requirements demonstrate some of the various changes needed in order to implement the technology. Some of these variations include language translation, cultural vetting (currently requested in twelve languages), and stakeholder input on translation, individual lists displaying local resources per county for users, removal of drip emails, marketing and therapy ads, improving usefulness for older adults, creation of peer competency training and badges within the application, crisis protocols within the application, user agreement/informed consent documents, develop new features such as diary cards for Dialectical Behavioral Therapy (DBT), and many more.

ENGAGING PEERS

To best align with federal and state authorities and Peer Advocates, the Innovation Tech Suite has adopted the following Peer definition: a person who publicly self-identifies with having a personal lived experience of a mental health/co-occurring issue accompanied by the experience of recovery and is trained to use that experience to support the people we serve. The overall vision of the Peer Role in the Tech Suite Collaborative Innovation is to incorporate Peer input, expertise, knowledge, and lived experience at all levels of the project, and to support the use of the apps through Peer outreach and training.

As this is a multi-county effort, there are several partners to support the project from outreach and engagement, development and customization of the technology, project management, and evaluation. The Peer role is central to the project and is being integrated with various project partners through:

- Branding, outreach, and engagement
- Testing & feedback
- Supporting Evaluation
- Helping inform the project work

SUPPORTING CHANGE

Organizational change is foundational to the learning and outcomes of the project. Organizational Change Management (OCM) is a widely recognized discipline that aims to increase adoption and sustainability of a change by preparing, equipping and supporting those who participate in the change. The Innovation Technology Suite has developed a plan, based on best practices from Prosci and Kotter, and includes organizational performance concepts of Knowledge, Motivation and Organizational influence from the work of Clark and Estes (2008).

EXHIBIT 3 – Knowledge, Motivation, Organizational Influences



LEARNING TECHNOLOGY

Simply learning about the technology solutions procured is not enough. The Tech Suite participants and target audiences must also learn about Technology as a whole.

The term agile describes an approach to software development which focuses on delivering working software in the hands of the customer in iterative cycles, faster than traditional project management methods. Agile development methods are beneficial to supporting and improving efficiency by helping staff manage product requirements, increasing staff knowledge and experience, and obtaining stakeholder feedback quickly and returning that feedback to the product development team faster.

The agile approach differs from traditional project management approaches because it seeks to deliver small pieces of working software consistently every few weeks rather than unveiling a final comprehensive product at the end of a project. The iterative agile process was created, in part, to address rapidly changing business requirements and environments which resulted in software solutions that were outdated even before they were delivered to the customer.

It is important to note the learning from this project is not limited to those in the public sector. Project partners have also been afforded the opportunity to learn more about what it means to bring technology to the public behavioral health system. These learnings will continue to serve as a foundation for future private-public partnerships.

Looking Forward

LESSONS AHEAD

The Innovation Tech Suite project continues to leverage the learning opportunities within the project including:

- The rapid development process presents the unique challenge of how to keep stakeholders apprised on a rapidly changing project. The project continues to develop communication channels and opportunities for engagement with stakeholders.
- The Innovation Tech Suite is opening a procurement to make additional technology available to participating cities and counties.
- Contribute to the national dialogue around the use of technology in behavioral health by counties working collaboratively with Peers and stakeholders to develop the definitions and processes for the Tech Suite project.
- Strengthen community engagement by building community understanding about digital health literacy through the vehicle of the Innovation Tech Suite.
- Continue to understand how technology applies within the behavioral health system of care to lead the charge on transforming our communities and saving lives.

The work of the Innovation Technology Suite to date has demonstrated introducing technology to the behavioral health system changes how care is delivered, how we protect privacy and security while providing maximum responsiveness and crisis interventions when needed, how digital health literacy is integrated to build awareness and prepare communities and stakeholders for innovation, and how we communicate project changes to the stakeholder community in a rapidly developing project. As the project continues, learning from these, and other areas, will continue to inform and shape the landscape of this new and innovative frontier.

GENERAL DISCUSSION
Agenda Item 9.B

SUBJECT: REPORT FROM CALMHSA EXECUTIVE DIRECTOR

ACTION FOR CONSIDERATION:

Discussion and/or action on items listed below, as deemed appropriate

BACKGROUND AND STATUS:

CalMHSA Executive Director, Wayne Clark, will be reporting on the status of CalMHSA projects

- General

FISCAL IMPACT:

None

RECOMMENDATION:

Discussion and/or action on items above, as deemed appropriate

TYPE OF VOTE REQUIRED:

None

REFERENCE MATERIAL(S) ATTACHED:

- None

GENERAL DISCUSSION
Agenda Item 9.C

SUBJECT: STATE HOSPITAL BED UPDATE

ACTION FOR CONSIDERATION:

None, information only

BACKGROUND AND STATUS:

At the April 23, 2012, Strategic Planning Session, staff was asked to work with CBHDA in exploring the JPA acting on behalf of member counties in the negotiations of the annual procurement contract with the state for state hospital beds.

Since 2012, CalMHSA, in collaboration with counties, has negotiated the terms of the MOU for procurement of state hospital beds, which has attributed to significant benefits to all counties procuring beds.

CalMHSA was also asked to provide services surrounding the counties use and procurement of patient Lanterman-Petris-Short (LPS) beds from the State of California, including the negotiation of the Memorandum of Understanding (MOU) for such beds. During this process, it became evident that counties would benefit from expanding the pool of providers for these beds.

As a result, CalMHSA was directed to research other possible providers. Upon going through a Request for Interest process, Correct Care Solutions (CCS) was selected as the provider. Since 2014, CalMHSA, in collaboration with its member counties and CCS, has sought to acquire or build a Mental Health Rehabilitation Center (MHRC) facility, for the placement of patients on LPS conservatorship that will serve as an alternative to the services currently provided by California State Hospitals. This collaboration has produced several different potential opportunities and remains hopeful that it will put forth a recommendation as sites are located.

Paso Robles Site

The Estrella Youth Correctional Facility was identified as an option in 2017. After three visits to the facility Correct Care assembled a team to further analyze.

On September 12, 2018 staff in collaboration with Correct Care Services, The Plenary Group, and Canon Designs did a comprehensive presentation of the alternatives to state hospitals potential site, Wellpath, formerly Correct Care Solutions, was instructed by CalMHSA to develop alternative pricing and funding models, which they have indicated to be available in late February.

Paso Robles. The project was placed on hold until additional financial options could be developed.

In December we were informed that the City of Paso Robles and State, Department of General Services (DGS), was at an impasse as it relates to the procurement of the land and both agreed it is better to move on. Therefore, State has decided to put the property out for public bidding. While that eliminates some disadvantages of the City, they remain interested and confident in their acquisition. They remain interested in working with the counties and a potential hospital site. On December 3, 2018, DGS released an updated notice for the facility indicating a “Request for Written Offer” would be available the second quarter of 2019. Since then the City of Paso Robles informed CalMHSA they remained interested in the site and working with CalMHSA, however it may not be until the end of summer 2019 before DGS is ready to discuss.

Kern County Possible Site

Early in 2019, Bill Walker (Kern County) proposed consideration of the County of Kern for a possible site for Alternative to State Hospital. Since that time, county staff has proposed several locations for site visits. After further assessment of the options, one site was selected, by Wellpath and Kern County (Lerdo) for consideration. A site visit took place on June 5th.

All present at the site visit expressed interest in the location and site, and in fact, in many ways, the site/location is better than the Paso Robles site/location. (Site visit agenda attached). The immediate next steps are:

- 1) ***Kern County Internal Discussion*** - for the County of Kern to discuss their interest in this project involving the use of their land. If positively affirmed;
- 2) ***Procuring Counties Packet*** - CalMHSA and Wellpath will immediately begin putting together a proforma package for the counties who will procure the most beds;
- 3) ***County Presentations*** - Present to those counties; and
- 4) ***CalMHSA Board*** - Present to CalMHSA the project, status, and input from direct county users for next steps.

Department of State Hospital

As reported at the September Board meeting on August 24, 2018, CalMHSA and counties met with the State Department of Hospitals to discuss the new contract, rate increases and the hiring of an independent assessment team to evaluate the department overall. CalMHSA staff received the new contract template, however given the numerous revisions needed, it has yet to share with counties for input.

On February 20, 2019, CalMHSA counties and committee members met with the Department given additional changes in administration had taken place, which also allowed for additional discussion related to the new contract template and plan for moving forward.

On March 26, 2019 the Department informed CalMHSA they were unable to complete their review of the independent assessment which would allow them to develop and propose new contract

language and potential rate increase prior to the start of FY19-20. Therefore, has determined it was necessary to extend the current MOU with not changes to the rate or terms, for one additional year, to allow them the necessary time to propose and vet the new language to the counties. As such, CalMHSA has issued new Program Participation Agreements and Amendments to the MOU for a one-year extension, to all member counties for their approval and execution.

FISCAL IMPACT:

None at this time

RECOMMENDATION:

None, information only

TYPE OF VOTE REQUIRED:

None, information only

REFERENCE MATERIAL(S) ATTACHED:

- Attachment A – Property Summary Sheet
- Attachment B – June 5 Meeting Agenda – CalMHSA & Kern County Site Visit

PROPERTY SUMMARY SHEET	
PROJECT NAME	Estrella Youth Correction Facility
LOCATION OF PROPERTY	4545 Airport Road, Paso Robles, CA San Luis Obispo County
ASSESSOR PARCEL NUMBER	025-434-001 (subject to change)
SUBMITTING AGENCY (agency name, contact person, and contact)	California Department of Corrections and Rehabilitation Contact: Terry Todd terry.todd@dgs.ca.gov Department Of General Services
DATE PROPERTY AVAILABLE FOR SALE	A Request for Written Offer will be available the second quarter of 2019
SIZE (IN ACRES)	Approximately 137 ±; Approximately 23 acres will remain state property for Cal Fire in the north/east section of the property.
TOPOGRAPHY	Level
STRUCTURES	Approximately 42 structures ± Plus two ground water wells
IMPROVEMENT SIZE	Approximately 336,778 SF ±
ADJACENT STATE USE CAL FIRE	Please review the document titled: Additional Information About Typical Camp Conditions
PRESENT USE	Vacant
ACCESSIBILITY	Airport Road
REASON FOR DECLARING SURPLUS	The facility no longer meets the program requirements of the Department.
LEGAL DESCRIPTION	See Preliminary Title Report
ESTIMATED MARKET VALUE	Interested parties advised to conduct their own due diligence of fair market value and possible uses for the property.
STATE DUE DILIGENCE	Posted on this link: http://www.dgs.ca.gov/resd/Home/SurplusPropertyForSaleHomePage/CDCREstrellaCF.aspx
DISCLAIMER	<i>The State reserves the right to amend or revise the content of this website at its sole discretion and as necessary to support the State's business needs and address any public health or public safety concerns. In the interest of homeland security and in accordance with Government Code Section 11011, certain data is excluded. The State makes every effort to ensure the accuracy and completeness of the information presented, but disclaims liability for omissions or errors in the contents of this website.</i>

MEETING AGENDA

June 5, 2019

CALMHSA & KERN COUNTY SITE VISIT

California Mental Health Services Authority

3043 Gold Canal Drive, Suite 200

Rancho Cordova, CA 95670

Office: 916.859.4800

Fax: 916.859.4805

www.calmhsa.org**10:30am – 12:00pm****1. Site Tour:**

Lerdo Facility
 17801 Farm Road
 Bakersfield, CA 93308
 (Industrial Farm Road & Lerdo Hwy)

Secondary Sites:

- Buttonwillow Airport
- Taft Airport

- A. Brief Introductions of attendees
- B. Kern County
 - i. Background and history of site
 - ii. Overview of site
 - iii. City's interest in site and plans for future
 - Use by City
 - Future Tenants/uses
 - iv. Update on infrastructure – utilities/roads

2. Wellpath

- A. Brief walk-thru from a basic site map of use (detailed review of site map at meeting)
- B. Walk thru areas to be renovated and proposed renovation

3. Questions and Answers**12:00pm – 1:30pm****4. Lunch and Meeting Site**

BHRS Admin
 2001 28th Street
 Bakersfield, CA

5. Formal Introductions and background (During lunch)

- CalMHSA
 - John Chaquica, Chief Operating Officer
- Kern County Representatives
 - Bill Walker
 - Katie Watkins

- Wellpath
 - Jeremy Barr, President, Wellpath Recovery Solutions
 - Katharine Osborne
 - Brian Miller
- County of Orange
 - Deborah Lent

6. Debrief of Site Visit

7. Wellpath/CalMHSA

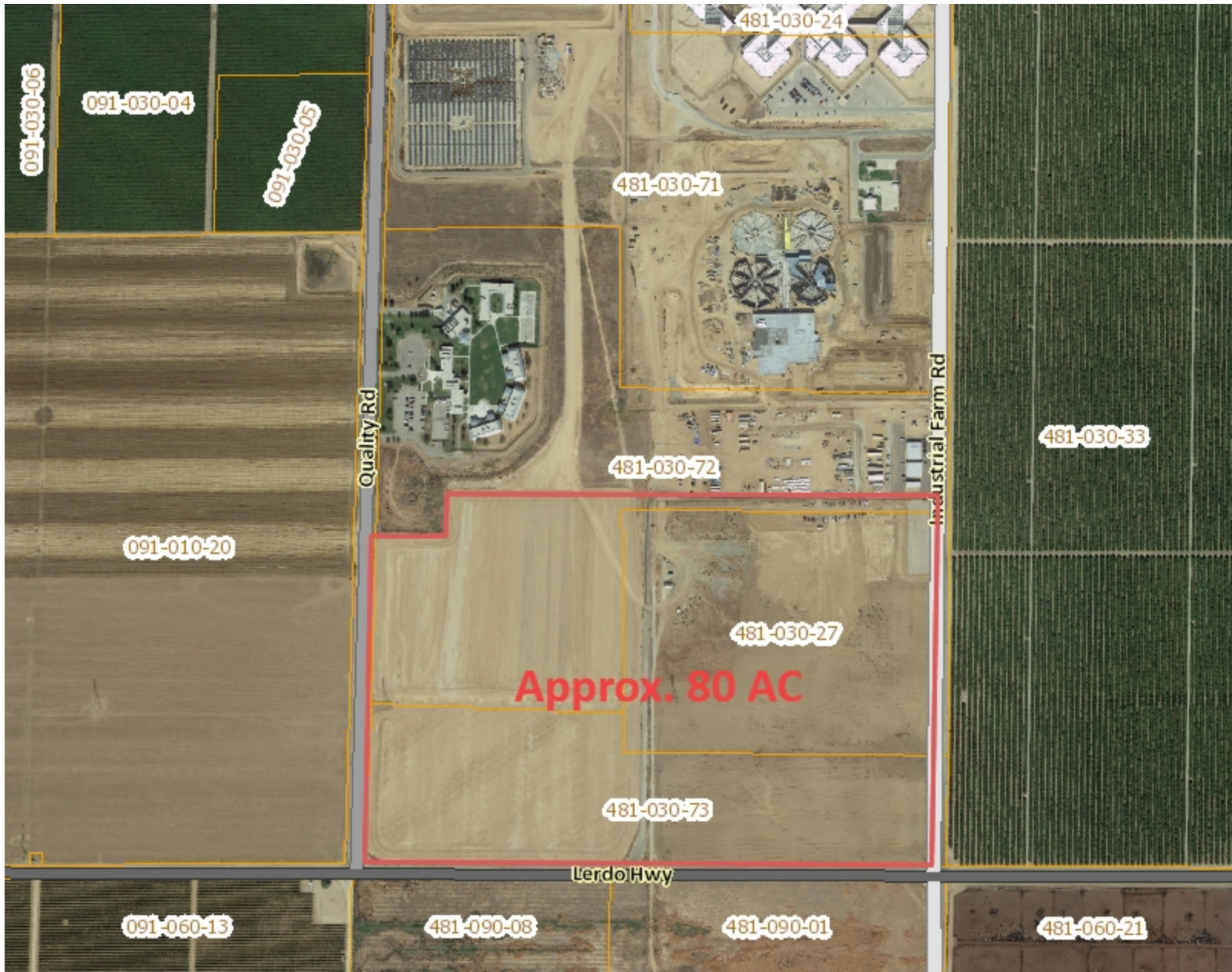
- A. Discussion of Role of Kern and benefits
- B. Strategic deal points—general discussion
 - i. Facility design
 - ii. Financing Model
 - iii. Structure
- C. Next Steps/Timeline

8. County Comments—Kern, Orange, Los Angeles

9. Confirm Next Steps

10. Adjourn

County Land at Lerdo



Legend

Roads 5k-10k

- Freeway
- Highway
- Major
- Minor
- Local
- Ramp
- Unpaved

Parcels Land

1: 9,028



0.3 0 0.14 0.3 Miles

WGS_1984_Web_Mercator_Auxiliary_Sphere
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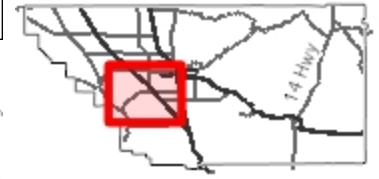
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Notes

SECONDARY SITES
KERN COUNTY SITE VISIT
JUNE 5, 2019



Airport Overview for Possible State Hospital


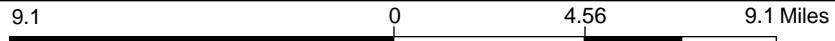


Legend

Roads 250k-500k

- Freeway
- Highway
- Major

1 : 288,895

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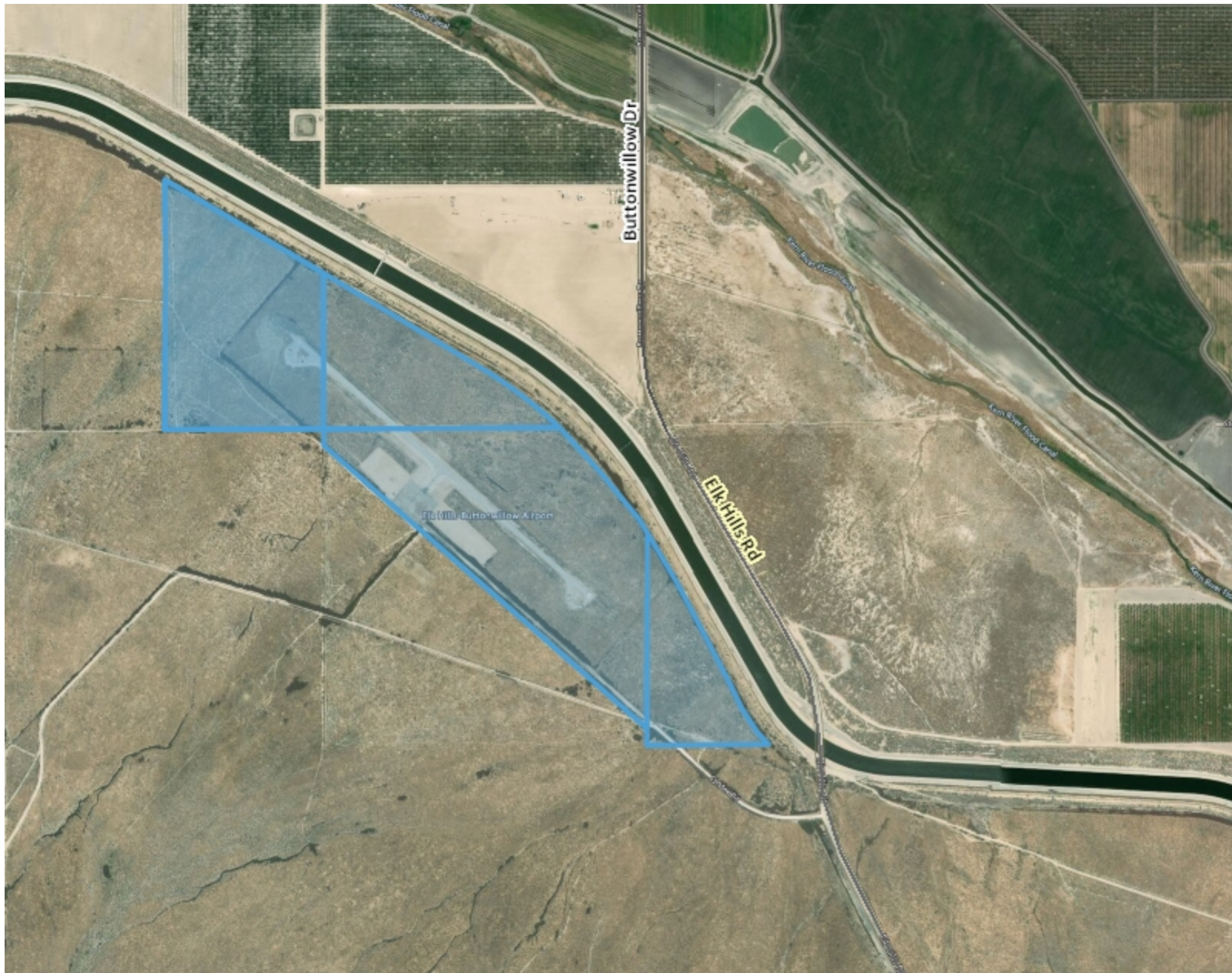
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Notes

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Buttonwillow Airport - aerial overview



Legend

Roads 10k-24k

- Freeway
- Highway
- Major
- Minor
- Local
- Ramp
- Unpaved

1: 18,056



0.6 0 0.28 0.6 Miles

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Notes

Taft Airport - aerial overview



Legend

Roads 5k-10k

- Freeway
- Highway
- Major
- Minor
- Local
- Ramp
- Unpaved

1: 9,028



0.3 0 0.14 0.3 Miles

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Notes